

## **NOBLE COUNTY HEALTH DEPARTMENT**

2090 N. State Road 9, Suite C Albion, Indiana 46701

Telephone: (260) 636-2191 Fax: (260) 636-2192

Clinic Fax: (260) 636-3753

Complaint Registered By:	Complaint Registered Against:
Printed Name:	Printed Name:
Mailing Address:	Mailing Address:
City/ State/ Zip:	City/ State/ Zip:
Phone Number:	Phone Number:
Complaint Type:	Location: (if no address is available)
: Food Issues	: On-Site Sewage Disposal
: Animal Bites	: Insect /Bed Bugs / Vector
	e contact the Attorney General, Consumer Protection Division and/Landlord ction call 317-232-6330 or submit a consumer complaint online at Complaint Hotline call 1-800-382-5516
Other:	
Description of complaint issues:	
By my signature I understand that this form is pu	ablic knowledge and the accused will be aware of the information.
Signature:	