

City of Porterville
Department of Public Works
Service Request / Complaint Form



Complainant: _____

Address: _____

Phone Number: _____ **Ext.** _____

Date: _____ (mm / dd / yyyy)

Problem Issue:

- Broken Sidewalk**
- Broken Curb**
- Broken Gutter**
- Broken Pipe**
- Pothole**
- Other**

Location / Explanation of Complaint:

Submit Form