

UPSHUR COUNTY COMPLAINT FORM

INSTRUCTIONS: Read this form and the instructions attached carefully before completing. All questions should be answered. However, if you do not know the answer, or if a question is not applicable, leave the question unanswered and fill out as much of the form as you can. Your complaint should be signed and dated and, if possible, notarized. Where more than one individual or organization is filing the same complaint, each additional individual or organization should complete boxes 1 and 7 of a separate complaint form and attach it to the original form, but the other boxes need not be completed if the information is the same as in the original. Complaints may be (1) mailed to the County of Upshur, P.O. Box 730, Gilmer, Texas 75644, or (2) filed or presented in person at the Upshur County Courthouse, 100 West Tyler Street, Gilmer, Texas.

1. Name of aggrieved person or organization

(Mr. Mrs. Miss) (Last Name-First Name-Middle Initial) Street address City County State Zip Code

2. Who is this complaint against?

Name (Last Name-First Name-Middle Initial) Street address City County State Zip Code Phone

Is the party named above a: (Check applicable box or boxes)

- Employee Elected Official Construction Other

Name and identify Others (if any) you believe violated the law in this case:

3. What did the person you are complaining against do and date of occurrence?

4. Do you believe there was discrimination because of it? (Check applicable box and write your race, color, religion, sex, or national origin on the line below checked)

- Race or Color Religion Sex National Origin Disability

FILED TERRY ROSS COUNTY CLERK 2017 JAN 31 AM 10:35 UP SHUR COUNTY, TX. DEPUTY

5. Please review the following and check the applicable box or boxes if they apply to your case.

The Locality has described its housing and community development needs in a manner clearly inconsistent with available facts and data;

The activities proposed in the TxCDBG contract are clearly inappropriate to meet the needs and objective;

The Locality has not complied with TxCDBG program requirements:

The proposed activities are not eligible for TxCDBG grant assistance.

6. Summarize in your own words what happened.

7. I swear or affirm that I have read this complaint (including any attachments) and that it is true to the best of my knowledge, information and belief.

(Date)

(Sign your name)

CITIZEN COMPLAINT FORM

ADDITIONAL INFORMATION

If you wish to explain in detail in an attachment what happened, you should consider the following:

1. If you feel that others were treated differently from you, please explain the facts and circumstances.
2. If there were witnesses or others who know what happened, give their names, addresses, and telephone numbers.
3. If you made this complaint to other staff or government agencies or to the **State**, explain when and what happened.

You should obtain assistance in filing a complaint at the offices listed below:

1. **Complain to the *Texas Department of Agriculture* under their Complaint System, 10 T.A.C. Sec. 178.1 and 178.2.**

Texas Department of Agriculture
Trade & Business Development
P.O. Box 12847
Austin, Texas 78711

2. **Complain to the *Secretary of HUD* by filing this form by mail or in person.**

Region VI -- Dallas
HUD
525 Griffin Street
Room 860
Dallas, Texas 75202-5032

Citizen's Complaint Form

1. Name/Address

2. Explain Complaint

3. Other Information

4. Your complaint will be responded to within 15 days of receipt of complaint.

5. An appeal of the County's decision may be submitted to:

Mail:
Texas Department of Agriculture
Texas Community Development Program
P.O. Box 12847
Austin, TX 78711

Phone:
1-800-835-5833
2007 JAN 31 AM 10:35
PSHWAR COUNTY, TX.
DEPUTY

FILED
TERRI ROSS
COUNTY CLERK