



**Town of Merrimack, New Hampshire
SERVICE REQUEST**

Tax Map Parcel(s): _____

Location and Description of Request or Complaint (detailed):

Description:

Party Making Request, Complaint or Inquiry:

Name;	Telephone #(Day):
Address:	(Evening):

Employee Receiving Request:

Printed Name:	Date:	Time:	Signature:
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Forwarded for Action to:	Date: 5/
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Chronological Report of Action

(Record date and time of action and name of employee making notification)

Additional pages may be used.

Cc: Walter Warren

Pink File