



City of Glenpool OKR04/OKR05 Stormwater

Public Contact/Incident Report

Part 1: Contact Information

Name of Individual/Agency/Department_____

Address of Individual/Agency/Department_____

Phone_____ email_____

Date_____ Other_____

Part 2: Complaint/Incident/Public Inquiry Details

Address of Complaint/Inquiry_____

Nature of

Inquiry/Complaint_____

Form SW-1

Person Processing Inquiry/Complaint_____

Corrective

Action_____

Additional

Details_____

Date of Final

Resolution_____

Stormwater Administrator or Other Authorized Employee