HAINES BOROUGH HELISKIING COMPLAINT FORM

P.O. Box 1209 ◆ 103 Third Avenue S. Haines, Alaska 99827
Ph: 907-766-2231 ◆ Fax: 907-766-2716 www.hainesborough.us

Today's Date: **Your Contact Information** Name: (first, middle initial, last) Mailing Address: (address, city, state, zip code) Physical Address: (address, city, state, zip code) Home Phone: (include area code) Work Phone: (include area code) Email: Complaint: Please describe the alleged or suspected violation in detail, including who, what, when, where and why. Helpful details include helicopter color and tail numbers, exact location, number of skiers, date, and time. (Attach additional pages or use the backside of this form, if necessary.) If you have photos, please email them to info@haines.ak.us or bring them to the Haines Borough Administration Building. For Borough Use Only Date Received by Borough Manager: Forwarded for Response or Investigation to: Copy given to: Date: Results of Investigation: _ **Action Taken** ♦ Complainant Contacted regarding Results of Investigation: Form Received by: _ Date Stamp: Contacted by Date ♦ Action: (attach additional pages, as needed) ☐ Date-stamped copy given to complainant