

In accordance with RCW 42.17, this document is public record

TIME OF INCIDENT:

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

ZIP:



MARKET 85 Pike Street, Room 500 | Seattle, WA 98101 | (206) 682-7453

COMPLAINT RECEIVED VIA:

☐ in-person

☐ phone

☐ other (please list):

☐ e-mail

☐ mail

COMPLAINT ROUTED TO:

☐ Marketing

☐ Commercial

☐ Daystall

☐ Parking

☐ Facilities

☐ Other

PLEASE DETAIL PDA RESPONSE TO **COMPLAINT**. IF THE **COMPLAINANT** RECEIVED A LETTER FROM THE PDA, PLEASE ATTACH A COPY OF THE LETTER TO THIS FORM. IF A PDA STAFF MEMBER HAD A PERSONAL MEETING WITH THE COMPLAINANT, PLEASE INDICATE THE DATE, TIME, AND OUTCOME OF THE MEETING:

PLEASE DETAIL THE **FINAL OUTCOME** OF THE COMPLAINT.

Signed: _____

Date: _____

PLEASE NOTE AND FOLLOW THROUGH IN THE FRONT DESK LOG BOOK