

**SUSPICIOUS OBSERVATION /
ILLCIT DISCHARGE COMPLAINT FORM**

Charter Township of Commerce

DATE: ___ / ___ / 20___

TIME OF COMPLAINT: ___:___ AM PM

TIME OF INCIDENT: ___:___ AM PM

LOCATION: _____ Vehicle I.D. _____

Major street intersection

Street address

OTHER NOTES: _____

TYPE OF DISCHARGE: _____

Emerging from ground from vehicle in stream in road ditch

Into manhole

unknown

COLOR: _____ SMELL: _____

VISCOSITY: _____ OTHER INFO: _____

PERSON FILING REPORT: _____

Name

phone no.

PERSON RECEIVING COMPLAINT: _____

Name

FOLLOW-UP ACTION:

Person Notified: _____

Name

Organization

Phone No.

Date of Notification : ___/___/___

Actions / Notes:
