Whitpain Township Human Relations Commission
Attn: Roman Pronczak
960 Wentz Road
Blue Bell, PA 19422

COMPLAINT SUBMISSION FORM

Date of Submission Submitted Via: ☐ Mail ☐ In Person

PERSON FILING COMPLAINT:

Name:

Mailing Address:

City: State: Zip: Email:

Telephone: Fax:

PERSON(S)/BUSINESS FILING COMPLAINT AGAINST:

Name:

Mailing Address:

City: State: Zip: Email:

Telephone: Fax:

INCIDENT DESCRIPTION: please provide a concise statement of facts, including pertinent dates, times, locations, people, and acts involved constituting the alleged discriminatory practice. (attach additional page(s) as needed)

Auxiliary aids and services are available upon request to individuals with disabilities.

IMPORTANT! THIS NOTICE MAY AFFECT YOUR RIGHTS AND SHOULD BE TRANSLATED IMMEDIATELY! If you need assistance, the Township will interpret this document free of charge.

Do You Need Assistance? — ¿Necesita Asistencia? Póngase inmediatamente en contacto con la oficina, llamando al número de teléfono que aparece en éste aviso.

☐ Yes ☐ No

Signature: **Date:**

TOWNSHIP USE ONLY

Date Complaint Received **Date Forwarded to Commission** **Staff Signature**