

PARKE COUNTY HEALTH DEPARTMENT

116 W High Street, Room 12, Rockville Indiana 47872

Telephone 765-569-4071 Fax 765-569-4061

Email: parkecohealth@yahoo.com

FOOD COMPLAINT FORM

Date _____

Your Name: _____ Address _____

City/Zip _____ Phone _____

Please check mark the nature of the complaint.

Bacterial

Suspected Tampering

Establishment

Chemical

Food borne illness

Other _____

Foreign Material

Mislabeling

Establishment Name _____

Establishment Address _____

Food Involved _____

Date of Visit _____ Time of Visit _____

Complaint: _____
