

Tehama County APCD Complaint Form

P.O. Box 1169, Red Bluff Ca 96080

Please fill out this form completely

Personal Information:

Do you want your name protected from public release? Yes No

Name (First/Last): _____

Mailing Address: _____

City/State/Zip: _____

Phone: _____ E-Mail: _____

Who is the complaint against?

Business Name: _____ Phone: _____

And/Or

Name (First/Last): _____

Address: _____

City/State/Zip: _____

What type of complaint are you filing? Ag burning Odors Dust Other

Please explain: _____

Your statement:

Date of complaint: _____ Time of complaint: _____

Are you experiencing any physical discomforts at this time?