

South Harrison Township

www.southharrison-nj.org



Office of the Clerk  
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TRASH / RECYCLING COMPLAINT FORM

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

NATURE OF COMPLAINT: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SENT BY: \_\_\_\_\_ ON: \_\_\_\_\_