



**BUENA VISTA CHARTER TOWNSHIP**  
1160 S. Outer Drive ♦ Saginaw MI 48601  
Dexter Mitchell, Interim Manager

989-754-6536

**CUSTOMER COMPLAINT FORM**

**Complainant Information**

Complainant Name: \_\_\_\_\_ Complaint #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_

**Complaint Information**

Complaint is against:

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Fire Department             | <input type="checkbox"/> Police Department     | <input type="checkbox"/> Department of Public Works |
| <input type="checkbox"/> Waste Water Treatment Plant | <input type="checkbox"/> Community Center      | <input type="checkbox"/> Administration Building    |
| <input type="checkbox"/> Water Department            | <input type="checkbox"/> Fiscal Services       | <input type="checkbox"/> Clerk's Department         |
| <input type="checkbox"/> Treasury Department         | <input type="checkbox"/> Community Development |   |
| <input type="checkbox"/> Other: _____                |  |   |

Description of Complaint: (Use back side of this form if more room is needed)

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

Safety issues involved with complaint:

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

Has this been a reoccurring problem?  Yes  No

If yes, have you made a complaint in the past?  Yes  No If yes, please give date: \_\_\_\_\_

Recommended Resolution from Complainant:

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

Complainant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Township Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Manager Copy                       Complainant Copy                       Complaint File Copy



# Mid Michigan Waste Authority

7950 Gratiot, Suite 5 Saginaw, Michigan 48609  
Phone: 989-781-9555 Fax: 989-781-9559

Non-RCL Issue Code

## Resident Complaint Log Refuse / Recycling / Yard Waste / Service Issues

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ cross-street(s) \_\_\_\_\_

City/Twp/Village \_\_\_\_\_ Date of Incident \_\_\_\_\_ Regular Pick-Up Day: \_\_\_\_\_

### Type of Complaint: (select box)

- Trash Issue
- Recycling Issue
- Yard Waste Issue
- Bulky Item(s) Issue
- Brush Issue
- Can / Bag Size Issue
- Ongoing/Multiple Week Issue
- Customer Service Issue \_\_\_\_\_
- Other \_\_\_\_\_

**Notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Action Requested:**  Resident requesting WM call  ETA of service \_\_\_\_\_  Do Courtesy P-Up

**Complaint taken by:** \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

**MMWA staff:** \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

- Info sent to resident
- Completed RCL sent to community

Move-outs, foreclosures and landlord set-outs are NOT included under the curbside program. Direct resident to call a hauler in Yellow Pages to arrange for a pick-up or other special services needed.

## WM Staff Response/Action to MMWA Resident Complaint Log

WM staff: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ COU's: # \_\_\_\_\_, # \_\_\_\_\_, # \_\_\_\_\_

### Trash

- oversize container - 33 gal max
- can/bag too heavy - 50 lb max
- trash stuck in can
- no trash in cardboard boxes
- loose trash; bags tom, waste spilled
- not included in trash program
- CoS - exceeded bag limit
- boxes need to be broken down
- yard waste mixed with trash

### Bulkies

- more than 2 bulk items
- bulky not contained
- bulk item pick-up scheduled:
- Ticket # \_\_\_\_\_
- Ticket # \_\_\_\_\_

### Brush

- not bundled properly
- too big; max. 3' x 4' bundle
- more than 1 bundle
- not brush; under 2" = yard waste under state law

### Recyclables

- not sorted properly
- items not recyclable
- no plastic bags allowed
- no recyclables in boxes
- cardboard too large
- no greasy pizza boxes
- Styrofoam in bin
- wrong week

### Yard Waste

- oversized container - 33 gal max
- no plastic bags allowed
- too heavy / stuck in can
- branches too big; max 2"
- container not marked
- bags ripped open
- contents exceed 6" above can

### OTHER

- materials not out by 7 am
- glass item needs prep (tape/OCC)
- Other \_\_\_\_\_

### WM Notes:

**Final WM:  
Action**

**Date / Time:**



# BUENA VISTA CHARTER TOWNSHIP

1160 SOUTH OUTER DRIVE • SAGINAW, MICHIGAN 48601-6595

PHONE: (989) 754-6536 • FAX: (989) 754-5930

TDD: (989) 754-3236

www.bvct.org

## Freedom of Information Act

### Request Form

Costs may only be charged if a copy of a public record is requested. No fee may be charged for an individual to simply review public records.

Date request received: \_\_\_\_\_ Date of Response \_\_\_\_\_

Requester's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

Record(s) Requested:

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

#### I. Duplication Costs:

Facility used: BVCT Hall

Other: \_\_\_\_\_

\_\_\_\_\_ Township-owned copier

\_\_\_\_\_ Commercial copier

Cost per copy \_\_\_\_\_ x Number of copies \_\_\_\_\_ = \$ \_\_\_\_\_

Cost per computer disk \_\_\_\_\_ x Number of copies \_\_\_\_\_ = \$ \_\_\_\_\_

#### II. Mailing Cost:

Cost per envelop \_\_\_\_\_ x Number of envelopes \_\_\_\_\_ = \$ \_\_\_\_\_

Postage costs (provide brief description) \_\_\_\_\_ = \$ \_\_\_\_\_

#### III. Labor Costs:

Due to the nature of this request, a labor fee is being charged for the search, examination, review and (is appropriate) the deletion and separation of exempt from nonexempt information as provided in Section 14 of the Freedom of Information Act. This fee is being charged because the failure to do so would result in unreasonably high costs to the Township. Specifically:

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

Hourly labor rate \_\_\_\_\_ x Number of hours \_\_\_\_\_ = \$ \_\_\_\_\_

#### IV. Total Charges: \_\_\_\_\_

Requested by: \_\_\_\_\_

Filed by: \_\_\_\_\_

**Buena Vista Charter Township**  
**Vicious Dog**  
**Registration Form**  
Ordinance No. 141

Dog Registration Fee \$10.00

\_\_\_\_\_ Date

\_\_\_\_\_  
Name (Owner)

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Emergency Contact

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Name (Dog)

\_\_\_\_\_  
Breed

\_\_\_\_\_  
Insurance/ Policy #

\_\_\_\_\_  
Dog License #

Description:  
\_\_\_\_\_  
\_\_\_\_\_

**Vicious dog**

1. A Vicious dog is any dog with a propensity, tendency or disposition to attack, to cause injury or to otherwise endanger the safety of human beings or other domestic animals.
2. Any dog which attacks, attempts to attack or which by its actions give indication that it is liable to attack a human being or other domestic animal one or more times without provocation.

According to the Center for Disease Control the Top 10 most dangerous dogs are listed below, if you are the owner of the following breeds they must be registered.

**Pit bulls, Rottweilers, German Shepherds, Huskies, Alaskan Malamutes, Doberman Pinchers, Chow Chows, Great Danes, St. Bernards, Akitas**

Registration of your dog is not limited to the above list, it is important to remember that any type of dog is potentially dangerous under the right circumstances. Many people believe that smaller dogs are less ferocious than larger ones, but even friendly dogs such as Dachshunds, Schnauzers, and Beagles can inflict serious damage.

**Please read the Vicious Dog Ordinance before returning your application, it provides you with the information you need regarding dogs in Buena Vista Charter Township.**

**(Attach dog photos on back of application)**

**Application for Business License in Buena Vista Charter Township for the year \_\_\_\_\_**

**Mail application to: 1160 S. Outer Drive  
Saginaw, MI 48601**

Ordinance No. 83 requires an annual licensing of business locations  
in Buena Vista Charter Township, Saginaw, Michigan.

NEW LICENSE

RENEWAL OF LICENSE

License # \_\_\_\_\_

Licenses expire \_\_\_\_\_

Other companies doing business at this address:

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

Name of business \_\_\_\_\_ Phone \_\_\_\_\_

Business also known as \_\_\_\_\_

Location to be licensed \_\_\_\_\_

Type of business \_\_\_\_\_ Approx. no. of employees \_\_\_\_\_

Owner's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address of Home Office \_\_\_\_\_

I hereby swear of affirm that I am authorized to make transactions for the firm or individual named herein; that I am at least twenty-one years of age; that I am fully aware of the duties and obligations of persons engaged in the business indicated above and agree to comply with the State Laws, and Buena Vista Charter, Township Ordinances and such rules and regulations as may now or hereafter be in effect, relating to the operation of said business and that the statements contained in this application are true to the best of my knowledge and belief.

Driver's License # \_\_\_\_\_ Signature of Person Making Application \_\_\_\_\_

Date of Birth \_\_\_\_\_ Residence Address \_\_\_\_\_

Subscribed and sworn to before me, a Notary Public in and for Saginaw County, Michigan, this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20 \_\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires \_\_\_\_\_