# VILLAGE OF DEPEW
# STREET LIGHT COMPLAINT FORM
(OUTAGES AND/OR PROBLEMS)

**DATE:** _____

**NAME:** _____
First Last

**ADDRESS:** _____

**PHONE:** (home/cell) _____

★ **STREET ADDRESS NEAREST TO POLE:** _____
No. Street Name

★ **NEAREST CROSS STREET:** _____

★ **LOCATION OF POLE:** (e.g. 2 poles from the intersection of Main Street & Maple Ave.)

_____

_____

_____

**IDENTIFYING LANDMARKS:** (e.g. ribbon or tape tied around pole)

_____

★ **WOODEN OR METAL POLE:** ☐ Wooden ☐ Metal

★ **STREETLIGHT PROBLEM:** ☐ Off ☐ Always on ☐ Flickering
☐ Cycling On and Off
☐ Other (describe problem)

★ **IS LIGHT ON A PUBLIC STREET?** ☐ Yes ☐ No

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**TO BE COMPLETED BY VILLAGE ELECTRICIAN FOR VILLAGE OWNED POLES**

POLE NUMBER/INFO: _____

NOTES: _____

_____

_____

☐ SUBMITTED ONLINE TO NYSEG DATE: _____
BY: _____

VILLAGE ELECTRICIAN: _____
George M. DelConte III