



**TOWN OF LA VETA**  
REQUEST FOR SERVICES

Full Name: \_\_\_\_\_

Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Type of Request (check one):

☐ Water

☐ Sewer

☐ Park

☐ Streets

☐ Maintenance

☐ Code Enforcement

☐ Unknown

☐ Other: \_\_\_\_\_

Address for Requested Services: \_\_\_\_\_

Description of problem:

Signature: \_\_\_\_\_

(Do Not Write Inside This Box)

Received on (date): \_\_\_\_\_

Town of La Veta  
209 South Main Street  
P. O. Box 174  
La Veta, CO 81055-0174

(719) 742-3631  
fax (719) 742-5420  
Huerfano County