

CITY OF HERREID

SOUTH DAKOTA

Ask a Question / Report a Problem

This form will help us identify issues in your area - and help address them more quickly. Should a problem require urgent attention, please call us immediately at (605) 437-2302. For police emergency, dial 9-1-1.

If a violation is found, a compliance letter or citation may be issued to the property owner. Depending on the type of violation, the City gives the property owners time to resolve most violations; therefore you may not always see immediate results.

Thank you for your assistance!

Contact Information

If you would like a response, please remember to include your email address in the box below.

Your Name _____

Your Address _____

Phone Number _____

Email Address _____

*Please select the category for your concern. **

- | | |
|--|--|
| <input type="checkbox"/> Abandoned Vehicles | <input type="checkbox"/> Overhanging Trees or Shrubs |
| <input type="checkbox"/> Animal Complaint | <input type="checkbox"/> Parking Issues |
| <input type="checkbox"/> Ask a Question | <input type="checkbox"/> Police Issue |
| <input type="checkbox"/> Complaint about City Employee | <input type="checkbox"/> Pothole |
| <input type="checkbox"/> Damaged Sidewalk | <input type="checkbox"/> Property Maintenance |
| <input type="checkbox"/> Garbage and Refuse | <input type="checkbox"/> Snow and Ice |
| <input type="checkbox"/> Hazardous Parking | <input type="checkbox"/> Street Lights |
| <input type="checkbox"/> Loose or Protruding Manhole Cover | <input type="checkbox"/> Water/Sewer Leak |
| <input type="checkbox"/> Noise Nuisance | <input type="checkbox"/> Vacant Buildings |
| <input type="checkbox"/> Opinion | <input type="checkbox"/> Weeds and Tall Grass |
| <input type="checkbox"/> Other | |

Brief description or question (or other problem not listed). Please give details of your complaint.

For timely response, please provide a detailed location description. (Street Address)

Intersecting Street (if applicable)

*Describe the location in detail. (ex. behind the garage, next to front steps, etc.)**

What action, if any, have you taken to resolve your complaint? (Who did you talk to and what was the response?)

What actions do you believe will resolve the complaint?

Signature: _____ Date: _____

Referred To:

Date: _____ Mayor
Date: _____ Street Department
Date: _____ Water/Sewer Department
Date: _____ City Council
Date: _____ Finance Office
Date: _____ Fire Department
Date: _____ Other: _____