



TEHAMA COUNTY PUBLIC WORKS

Service Request and Safety Concerns Form

Requestor's Contact Information:

Name: _____ Phone #: _____

Address: _____

Email: _____ Date: _____

Request or Safety Concern Description:

Street: _____ Crossroad: _____

District: _____

Please use provided GIS Map on Website

Is this your first request for assistance on this issue? Yes No

Is this an imminent safety hazard? Yes No

Description of Issue: