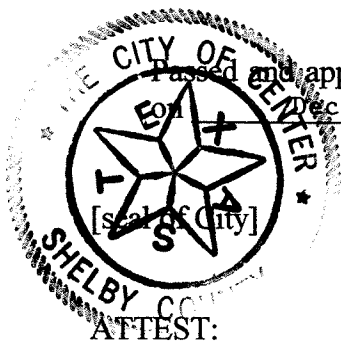


CITY OF CENTER, TEXAS
CITIZEN COMPLAINT PROCEDURES

for the
TEXAS COMMUNITY DEVELOPMENT PROGRAM

In order to comply with the Texas Department of Housing and Community Affairs' Complaint System, 10 T.A.C. Sec.178.1 and 178.2, the following citizen complaint procedures, adopted by the City of Center, Shelby County, Texas, are intended to provide a timely written response to all complaints and grievances made against the Center, Shelby County, Texas, Community Development Program efforts:

1. A person who has a comment or complaint about the services funded or to be funded by a block grant administered by the City, may submit such comment or complaint in writing to the City Manager who is responsible for administering the block grant program.
2. The City Manager shall, within five work days of receiving the comments or complaints, conduct an investigation into same, determine an appropriate response to same and so advise the person who made said comments or complaints, in writing. If, for any reason this cannot be done, the City Manager will, within five working days of receiving the comment or complaint, advise the person making the comment or complement, in writing, why the response cannot be provided within five working days of receiving the comment or Complaint and when a response can be expected.
3. The City Manager shall notify the person who made said comments or complaints, in writing, of the final results of any investigation conducted. Unless unusual circumstances interfere, all investigative action and reports documenting the findings of same should be accomplished prior to the 15th working day after the comments or complaints were originally received. Should this final response be delayed, the person making the comments or complaints, must be so advised in writing, to include the problems being encountered and a new date for final resolution of the comment or complaint.
4. A copy of the above outlined comment and/or complaint procedures can be obtained at the city hall in the City of Center, Shelby County, Texas, between the hours of 8:00 A.M. and 4:30 P.M., Monday through Friday (except holidays).



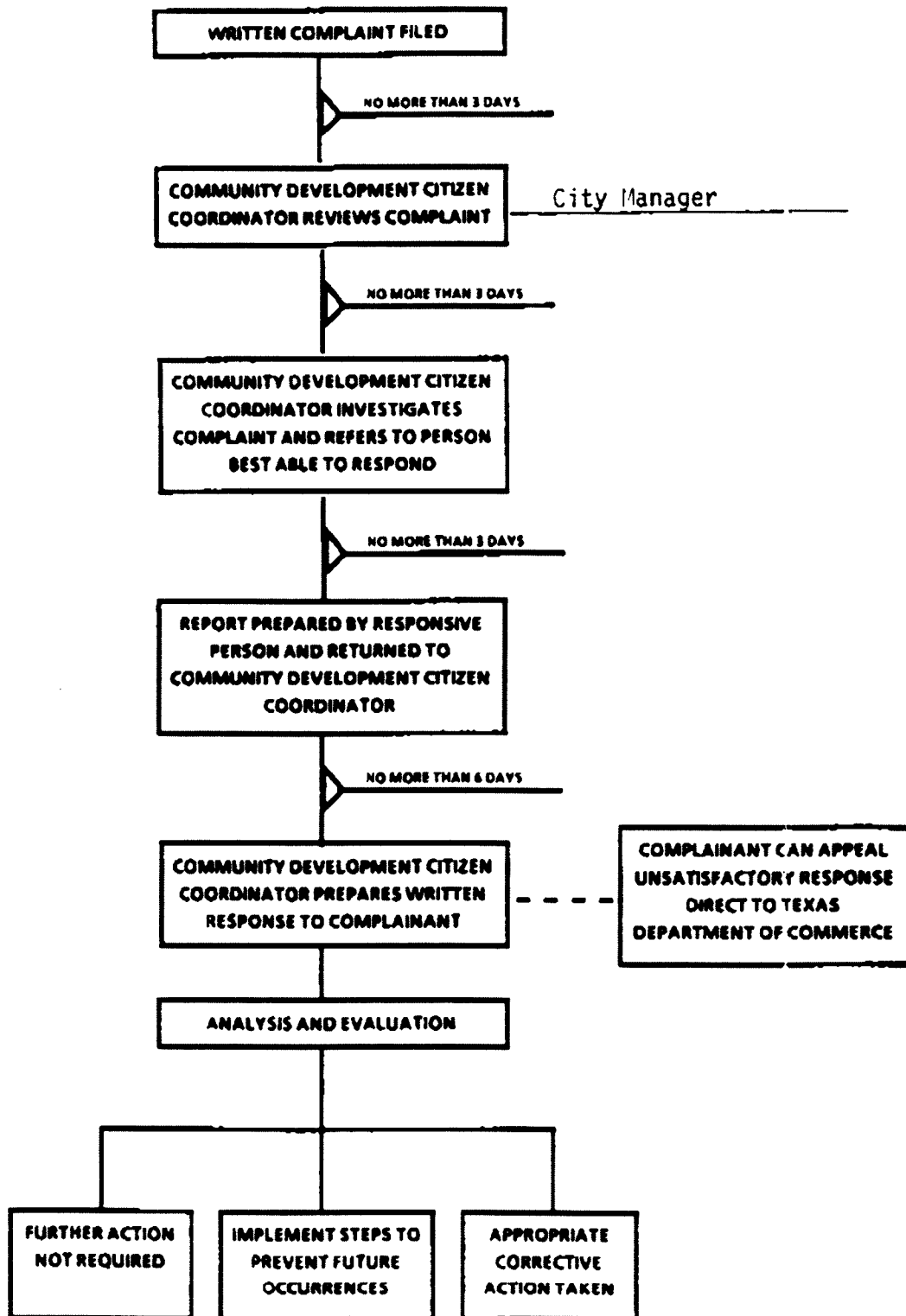
Passed and approved by the City of Center, Shelby County, Texas governing body
December 12, 2005

MAYOR

CITY MANAGER

CITIZEN COMPLAINT PROCEDURE

TEXAS COMMUNITY DEVELOPMENT PROGRAM



CITY OF CENTER CITIZEN COMPLAINT FORM**ADDITIONAL DETAILS**

If you wish to explain in detail in an attachment what happened, you should consider the following:

1. If you feel that others were treated differently from you, please explain the facts and circumstances.
2. If there were witnesses or others who know what happened, give their names, addresses, and telephone numbers.
3. If you have made this complaint to other City staff or government agencies or to the **STATE**, explain when and where and what happened.

You can obtain assistance in filing a complaint at the offices listed below:

1. **Complain to the Texas Department of Commerce** under their Complaint System, 10 T.A.C. Sec. 178.1 and 178.2.

Texas Department of Commerce
P. O. Box 12728, Capitol Station
Anson Jones Building
410 East Fifth
Austin, Texas 78701
(512) 320-0110 (Information)

2. **Complain to the Secretary of HUD** by filing this form by mail or in person.

Region VI - Dallas
HUD
New Dallas Federal Building
1100 Commerce Street
Dallas, Texas 75202

CITY OF CENTERS CITIZEN COMPLAINT FORM

INSTRUCTIONS: Read this form and the instructions on reverse carefully before completing. All questions should be answered. However, if you do not know the answer or if a question is not applicable, leave the question unanswered and fill out as much of the form as you can. Your complaint should be signed and dated and, if possible, notarized. Where more than one individual or organization is filing the same complaint, each additional individual or organization should complete boxes 1 and 7 of a separate complaint form and attach it to the original form, but the other boxes need not be completed if the information is the same as in the original. Complaints may be (1) mailed to the _____, or (2) filed or presented in person at the _____

FOR CITY USE ONLY
Number _____
Date _____
Filing Date _____

DATE OF PRIOR ACTION, IF ANY

PRELIMINARY DETERMINATION

PLEASE TYPE OR PRINT

Telephone Number _____

1. Name of aggrieved person or organization

(Mr. Mrs. Miss) (Last Name - First Name - Middle Initial) Street Address City County State ZIP Code

2. Whom is this complaint against?

Name (Last Name - First Name - Middle Initial) Street Address City County State ZIP Code Telephone Number

Is the party named above a: (Check applicable box or boxes)

City Employee Council Member Contractor of the City Other

Name and identify Others (if any) you believe violated the law in this case:

3. What did the person you are complaining against do?

When did act or acts occur? (Be sure to include most recent date, if several dates are involved)

4. Do you believe there was discrimination because of? (Check applicable box and write your race, color, religion, sex or national origin on the line below the box checked)

Race or Color Religion Sex National Origin

5. Please review the following and check the applicable box or boxes if they apply to your case.

The City has described its housing and community development needs in a manner clearly inconsistent with available facts and data; The activities proposed by the City are clearly inappropriate to meet the City's needs and objectives;
 The City has not complied with TCDP program requirements; The proposed activities are not eligible for TCDP grant assistance.

6. Summarize in your own words what happened. Use this space for a brief and concise statement of the facts. Additional details of what happened may be provided on an attachment.

NOTE: The City will furnish copy of complaint to the person or organization against whom complaint is made.

7. I swear or affirm that I have read this complaint (including any attachments) and that it is true to the best of my knowledge, information, and belief.

(Date)

(Sign your name)

8. Subscribed and sworn to before me this _____ day of _____ 19 _____

NOTARIZATION:

(Name)

(Title)

SEAL

IF IT IS DIFFICULT FOR YOU TO GET A NOTARY PUBLIC TO SIGN THIS, SIGN YOUR OWN NAME AND MAIL IT WITHOUT NOTARIZATION. THE CITY WILL HELP YOU GET YOUR COMPLAINT SWORN TO.