



**New York State Office Of Parks , Recreation & Historic Preservation**

**General Complaint and Comment Form**

The New York State Office of Parks, Recreation & Historic Preservation strives to make your experience at our parks and historic sites as enjoyable as possible. Please let us know how we are doing.

**Please Print or Type All Requested Information**

**1. Contact Information / Check Preferred Means of Contact**

Name:

Address:

Telephone Number

Day ( ):

Evening ( ):

Email:

**2. Nature of Complaint or Comment**

\_\_\_\_\_ PROGRAM/ ACTIVITY

\_\_\_\_\_ PARK FACILITY

\_\_\_\_\_ SERVICE PROVIDED

\_\_\_\_\_ POLICIES/PRACTICES

\_\_\_\_\_ DISCRIMINATION ISSUES

\_\_\_\_\_ CONCESSIONAIRE

\_\_\_\_\_ OTHER

**3. Complaint or Comment Information**

Region and Park or Facility Name:

Names of Park Staff Involved in the Complaint or Comment:

Date(s) Complaint or Comment Occurred on:

Description of the Complaint or Comment:

*Check here if you have included additional sheets or other material* \_\_\_\_

To the best of my knowledge, the information provided is true and complete.

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Submit Form to:**      **Director of Operations**  
                                 **New York State Parks, Recreation, and Historic Preservation**  
                                 **Albany, NY 12238**