

COMMUNITY FEEDBACK & GRIEVANCE FORM

STAKEHOLDER(S)'S INFOR	MATION:	FOR INTERNAL USE:	
Name:		Received by:	
Mailing Address:		Date:	
Physical Address:		Place/Method:	
Town:	Postal Code:	Date Logged:	
Phone #		Date Closed:	
Email:			

Proposed or requested solution:				

Exact location, if applicable:

Stakeholder(s) Signature/Date

Site Representative Signature/Date

Grievance@Perpetua.us

Perpetua Resources CO: Grievance Review Team 13181 ID-55 Donnelly, ID 83615