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| **Formulari d’incidència** |

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| **Data:** |  |

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| **Problema:** |  |

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| **Descripció:** | | | | | | |
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|  | | | | | | |
| Espai públic: |  | Espai privat: |  |  | Fotos adjuntes: |  |

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| **Dades de la incidència:** | | | |
| Nom: |  | | |
| Adreça: |  | | |
| Barri/sector: |  | | |
| Municipi: |  | | |
| Telèfon: |  | Mail: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Dades de la persona que ha atès la incidència:** | | | |
| Nom: |  | Càrrec: |  |
| Ajuntament: |  | Telèfon: |  |
| Mail: |  | | |