

**1.0 Complaint Form Submitted By:**

Your Name:	Your Signature:
Contact Numbers:	Cell:
	Home Telephone:
	Work Telephone:
Email Address:	
Mailing Address:	

**1.1 Complaint Summary**

What is the nature of your complaint? Please include relevant date(s), location, and all background information, including any Municipal employees you have contacted regarding this matter. (Please attach a separate page to this form submission if you require additional space to record your complaint).

**Please note: You may be summoned to court to testify concerning this complaint.**


**1.2 How do you see this situation being improved?**


**1.3 Additional Information**


**Office use only:**

File Number:		Received by:	
CAO Signature:		Delegated to:	

Acknowledgement of the Receipt of Complaint			
Date Sent:		By Staff:	

Action Taken:	

Final Response to Complaint			
Date Sent:		By Staff:	
CAO Initials:		Copies attached:	