SCHEDULE "A" By-Law No. 1019

COMPLAINT FORM MUNICIPAL INVESTIGATION

IN ACCORDANCE WITH Section 239 of the Municipal Act 2001 (As Amended)

A FEE OF \$25.00 MUST ACCOMPANY THIS FORM PRIOR TO BEING PROCESSED.

PLEASE FORWARD COMPLETED FORMS TO:

Mark McDonald
Independent Resolutions Incorporated
519-670-4517
IndependentResolutions@gmail.com

COMPLAINT FORM FOR MUNICIPAL INVESTIGATION

Section 239 – Municipal Act 2001 (As Amended)

COMPLAINANT 'S						
NAME						
ADDRESS						
mar partoria	Hove		<u> </u>	Weny	T	
TELEPHONE	Номе			Work		
E-MAIL						
CAN YOUR IDENTIT	Y BE REV	EALED DURING THE	Investigati	ON?	YES[]	NO[]
		IS COLLECTED UNDER THE USED BY THE MUNICIPA				
NAME OF MUNICIPALITY						
DATE OF CLOSED MEETING						
MUNICIPAL CONTACT NAME						
TELEPHONE						
		•				
		d provide as much info lar occurrence. (i.e.) T				ture and background of Explanation.
*			<i>g</i> ,		,	

ACTION	Activities that the complaina	nt has undertaken to resolve the matter.
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	<u>,</u>	
SUMMARY / CO	DMMENTS	
Date of	signature	Signature of Complainant