



By-law and Compliance Complaint Form

Complainant Information:

Name: _____

Address: _____

Telephone Number(s): _____

Email Address: _____

Address/Location of Complaint:

Details of Complaint:

(Please include as much detail as possible, including description of vehicle/ violation/ person/animal, etc, approximate window of time violation is occurring, etc.)

Please note: All fields must be completed in their entirety in order for a file to be activated for investigation.

Office Use Only:

Date received: _____ Date activated: _____

Staff Name: _____ Signature of staff: _____
(please print)