



## Municipal Complaint Form

**Please provide us with your contact information.**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

**What is your complaint?** Please include relevant date(s), location, and background information, including municipal employees you have contacted regarding this matter. Additional space is available on the back of this form. Additional information, such as relevant photographs, can be attached to this form.

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Please describe how you would like to see your complaint resolved:

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How would you like us to contact you?      Email       Telephone       Mail

Complainant Signature: \_\_\_\_\_

Date of Submission: \_\_\_\_\_