



COMPLAINT FORM/REQUEST FOR INVESTIGATION

Complainant Information

Name: _____

Mailing Address: _____

City: _____ Postal Code: _____

Telephone: _____

Email address: _____

Issue Statement

Member of Staff or Service about whom the concern applies:

Please provide a description of the concern/complaint. Include specifics such as the date and location of the prohibited behaviour or activity; names of other persons involved or witnesses; etc. If more space is required, please attach a separate page.

Complainant/Requester's Signature: _____

Date of Submission: _____

Personal information collected on this form is collected under the authority of subsection 10(1) of the Municipal Act, 2001. The information collected will be used to respond to concerns or complaints submitted to the Township of Malahide from members of the public using its Complaint Form. Questions about the collection of this information can be directed to: Clerk, 87 John St. S., Aylmer, Ontario, N5H 2C3, tel. 519-773-5344, ext. 225.