



MUNICIPALITY OF NORTH MIDDLESEX
229 PARKHILL MAIN ST.,
PARKHILL, ON N0M 2K0

Phone (519)294-6244
www.northmiddlesex.on.ca

TYPE OF COMPLAINT: _____

DATE: _____ TIME OF COMPLAINT: _____

NAME OF COMPLAINANT: _____

ADDRESS: _____ PHONE: _____

NATURE OF COMPLAINT: _____

ACTION TAKEN: _____

All complaints will be directed to the Clerks Office for disposition to appropriate department's Manager and/or Director. If the complaint falls within the CAO Office, the complaint will be provided to the Head of Council. In the event, the complaint falls within the Clerk's Office, the complaint shall be provided to the CAO for review and disposition.

Information collected using this form will be used for internal purposes only and will form part of an investigative record. If, as a result of the investigation, further legal action is taken, this record and any information contained therein may be used as part of the proceedings including name and address of complainant.

Personal information contained on this form is collected pursuant to the Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Freedom of Information and Privacy Co-ordinator at the institution where the request is made.

COMPLAINANT SIGNATURE

RECEIVED BY

DATE & TIME: _____