

CITIZENS CONFIDENTIAL COMPLAINT FORM

Date:	Time:
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Complainant's Name:	
Address:	
Phone #:	
Offender's Name:	
Address:	
Phone #:	

Nature of Complaint:

I understand that as the complainant in this matter my name will not be released to the accused and I am willing to appear in Provincial Offences Court as a witness for the Town should charges be laid by the Municipality. Please Note: Unsigned complaints will be processed on a "time available" basis.

Signature(s):

----- FOR OFFICE USE ONLY -----

Investigating Officer(s):

Findings:

Action Taken by Investigating Officer(s)	Issued Warning	Charges Laid	Notice Posted	Referred	Complaint Unfounded	No Action

Recommendations of the Municipal Law Enforcement Office

Referred to: (Check one or more of the following)

Building Dept.	Property Standards	Zoning Dept.	Public Works Dept.	S.C.D.H.U.
Signature of Reporting Officer(s):		M	C	S

