



## Confidential Complaint Form

Location of Offence (civic address): \_\_\_\_\_

Date Offence was observed: \_\_\_\_\_

Type of Bylaw Complaint: Unsightly Property \_\_\_ Parking \_\_\_ Noise \_\_\_ Zoning \_\_\_ Snow/Ice \_\_\_

Homeless Camp \_\_\_ Business Issues \_\_\_ Other (Please specify) \_\_\_\_\_

### DETAILS OF COMPLAINT

### **COMPLAINANT INFORMATION** *\*Anonymous complaints will not be investigated.*

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

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

City: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

*Confidentiality will be maintained between the complainant and the alleged offender, except where necessary in a court of law. However, should this matter proceed to Court, you may be required to give evidence as a witness and your name and your filed complaint will become public information. If you wish to check on the status of this file, please call 604-820-3727.*