



By-Law Compliant Form

Office Use Only

Received By: _____

Date: _____

To assist the Cramahe By-Law Department in following up on your complaint, please print the details of your inquiry below. The information must be completed in full, along with any information you wish to relate to the Enforcement Officer. Once you have submitted the complaint, an Officer will respond within 3 business days.

Complainant Information

Name of Complainant(s): _____

Address: _____

Telephone: _____

Violation Information

Complaint Type:

Property Standards

Animal Complaint

Signs

Parking

Other

Have you contacted the owner or agent regarding this complaint?

Yes

No

If yes, how were they contacted?

Phone

In Writing

Verbally

Have you made a complaint regarding this issue before?

Yes

No

Location of Potential Violation: _____

Property Owner: _____

Details of the Complaint:

I HEREBY acknowledge that all complaints are confidential until such time as the complainant may be asked to testify in support of the complaint; *AND FURTHER* acknowledge that if required I will attend and testify in support of this complaint at any Court of Law in the Province of Ontario.

Signature: _____ Date: _____

PERSONAL INFORMATION: This information is being collected for the purpose of conducting a Bylaw Enforcement Investigation. The information may be shared with applicable Township of Cramahe departments and agencies for the purpose of initiating appropriate action relative to this report. The collection of the personal information on this application is authorized and protected under the Freedom of Information and Protection of Privacy Act, Section 33(c). By providing this information, you have consented to its use for the above purposes. If you have questions about the collection and use of this information, you may contact the Clerk, at 905-355-2821.

NOTE:

Please refer to the Bylaw Policy for all information pertaining to how a formal complaint is handled. This will ensure the most effective outcome of your complaint.

For Office Use Only

Applicable By-Law(s): _____

Name of Owner: _____

Mailing Address of Owner: _____

Roll #: _____

Referral Date: _____ Referred to: _____