

## The United Townships of Head, Clara & Maria

## Complaint Form "Schedule A" to Policy A-06

COMPLAINANT (	CONTACT INFORMATION			
Please note that y	our personal information will rem	ain confidential unless r	equired for	court.
First Name				
Last Name				
Phone Number				
Street Address				
Town		Postal Code		
Email Address				
NATURE OF CON	ИPLAINT			
	Administration			
	Recreation			
	Facilities			
	Waste Collection/ Disposal			
	Building/ Zoning			
	Road Maintenance			
	Other (please specify)			
COMMENTS/ AD	DDITIONAL DETAILS			
This section allow	ws for a detailed description of	the complaint, includi	ng any info	rmation that
may assist with i	nvestigation and resolution of t	the complaint.		
All complaints w	ill be dealt with in a confidentia	I manner according to	the Munici	ipal Freedom
of Information a	nd Protection of Privacy Act. Inf	formation will be collec	cted, used o	and disclosed
in compliance w	ith the Act.			
Date Filed		Signature of		
		Complainant		