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Complaint Form

Date _____

In Person Phone Call Emailed

Describe: _____

Against Who? (Location): _____

Form Completed By: (Required): _____
Name _____
Address _____
Phone Number _____
Email: _____ Keep Confidential

Internal Use Only:

Action:
To By-Law Enforcement Date: _____
To Works Date: _____
Other (Explain): Date: _____

