

MUNICIPAL LAW ENFORCEMENT DEPARTMENT



TOWNSHIP OF SEVERN

THE CORPORATION OF THE TOWNSHIP OF SEVERN

P.O. Box 159, Orillia, Ontario, L3V 6J3

COMPLAINT FORM

DATE: _____ TIME: _____

NAME: _____

PHONE: _____
HOME CELL

EMAIL: _____

ADDRESS OF CONCERN: _____

OWNER: (If known) _____

REASON OF CONCERN: _____

SIGNATURE OF COMPLAINANT: _____
(Not required if sent via electronic mail)

Note: All complainant information must be completed, dated, and signed. Investigations will not be conducted on incomplete forms. Complaint forms can be submitted in person, by fax, email and regular mail to the Township Office, P.O. Box 159, 1024 Hurlwood Lane, Orillia, ON, L3V 6J3.

Personal information contained in this form is collected under the authority of the Municipal Act, 2001, Chapter 25, as amended, and will only be used for the purposes for which it was collected. Questions about this collection of information should be directed to the Municipal Law Enforcement Division, P.O. Box 159, 1024 Hurlwood Lane, Orillia, Ontario, L3V 6J3 Phone: 705-325-2315, Fax: 705-327-5818.

OFFICE USE ONLY

Case # _____

Action Request Info.

Roll # _____

Diary Dated _____

Follow Up _____

Completed by: _____