

COMPLAINT FORM

This form represents a request to resolve a Zoning By-law issue. In order for the Eastern Interlake Planning District to proceed with an investigation and follow-up to your complaint, it is mandatory that you give your full name, civic/street address, email and phone number along with your signature below. Anonymous complaints will not be accepted.

Complaint Received From:

Date:		Time:	
Name:			
Mailing Address:			
Civic/Street Address:			
Legal Description:		Roll No.:	
Phone:		Email:	

Complaint Regarding:

Municipality:	<input type="checkbox"/> RM of Gimli <input type="checkbox"/> Town of Arborg <input type="checkbox"/> Municipality of Bifrost-Riverton <input type="checkbox"/> Town of Wpg Beach
Property Owner or Tenant Name (if known):	
Civic/Street Address:	
Nature of complaint – eg. details of zoning infraction(s), how it affects you, how long it has existed, etc.	

NOTE: Anonymity will be maintained between the complainant and the alleged offender, except where necessary in a court of law. However, should this complaint proceed to Court, you may be required to give evidence as a witness and your name and your filed complaint will become a matter of public record.

PERSONAL INFORMATION: This information is being collected for the purpose of conducting Bylaw Enforcement action relative to this report. The collection of personal information on this application is authorized and protected under the *Freedom of Information and Protection of Privacy Act, Section 36(1)*. By providing this information, you have consented to its use for the above purposes. If you have any questions about the collection and use of this information, you may contact the Planning Office at (204) 642-5478.

Instructions:
 Complete form and submit to the Planning Office in person, by fax, by mail or email.
 Contact info in letterhead above.

Signature of Complainant: _____

FOR OFFICE USE ONLY

Date Received:		Form rec'd by:	<input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Hand Delivered
Property Owner:			
Civic/Street Address:			
Legal Description:		Roll No.:	