



The Corporation of the Township of Black River-Matheson Complaint Form

The Township of Black River-Matheson is committed to promptly addressing the concerns of our Municipality, which will include, but not limited to by-law infractions, road conditions, programs, facilities, municipal services, staff or operational procedures. Please be advised that The Township of Black River-Matheson will only respond to formal complaints received from a complainant who shall provide their full name, telephone number and address. All complaints will be dealt with in accordance with the Municipal Freedom of Information and Protection Privacy Act.

COMPLAINANT CONTACT DETAILS

First Name *	Last Name *
Email Address *	
Mailing Address *	Phone Number *

COMPLAINT TYPE

- Access of Services
- Programs
- Facilities
- Staff Conduct
- Processes or Procedure
- Other

SUMMARY OF COMPLAINT

Please provide information on what happened, who was involved, dates, times and photos if available. Please provide as much detail of the situation.

Details:



**The Corporation of the
Township of Black River-Matheson
Complaint Form**

Location of incident
Staff persons involved (if known and applicable)
Please include any documentation in support of complaint

RESOLVE

How do you suggest the complaint be resolved?

SIGNATURE

Complaint's signature
Date Complaint submitted (mm/dd/yyyy)

NOTICE OF COLLECTION

All personal information collected on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). The information submitted will be used for the purpose of investigating the complaint.

FOR INTERNAL USE ONLY

Date complaint received: (mm/dd/yyyy)	Receiver Initials:
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Complaint Form**

Internal Resolution