



COMPLAINT REPORT
TOWN OF DESERONTO

COMPLAINANT'S NAME _____

COMPLAINANT'S ADDRESS _____

_____ TELEPHONE # _____

DATE _____

REGARDING

DESCRIPTION OF PROBLEM _____

AT

MUNICIPAL ADDRESS _____

NAME OF OWNER/TENANT _____

COMPLAINANT'S SIGNATURE _____

FOR OFFICE USE ONLY

DESCRIPTION OF ACTION TAKEN _____

DATE _____ SIGNATURE _____

The Municipality will not release the name of the complainant, but if charges are laid for violation of Municipal by-laws, it may be necessary to involve the complainant as a witness to the action.