Council Code of Conduct Formal Complaint Form

Date _____

Complainant Information

Name _____ Attention (if applicable) _____

Street Address _____

Municipality _____ Province _____ Postal Code _____

Telephone Number (_____) _____ Email Address _____

Complaint Against

Type: ☐ Member of Council ☐ Committee/Board Member

Name of Council/Committee/Board Member: _____

Policy 1-02 Council Code of Conduct, Section Contravened: _____

Detailed Description

*If you require more space, please attach a separate sheet of paper, along with any additional supporting materials.

Council Code of Conduct Formal Complaint Form

Declaration

I, the undersigned, have reasonable grounds to believe that the named Member of Council (or member of a Township committee or board appointed by Council) has contravened the Code of Conduct for Members of Council and Local Boards (Policy 1-02) as outlined in my complaint above.

Declared before me at
the _____
of _____
in the Province of Ontario,
this _____ day of _____ , _____

_____
Commissioner's Signature
(Commissioner for taking affidavits, etc.)

_____
Signature of Complainant

Submission Requirements
Please submit a completed complaint form (including supporting documentation, where applicable) to the attention of the Township Clerk at the address listed below.

Township of Greater Madawaska
c/o Township Clerk
19 Parnell Street
Calabogie, Ontario, Canada
K0J 1H0

Notice of Collection of Personal Information
Personal Information is collected under the authority of sections 223.1 to 223.8 of the *Municipal Act, 2001.* The information will be provided to enforce the Council Code of Conduct. This form will be shared with the Integrity Commissioner and may be shared by the Integrity Commissioner with any persons the Integrity Commissioner deems necessary as part of any investigation. Questions about the collection and use can be directed to the Township Clerk, Township of Greater Madawaska, 19 Parnell Street, Calabogie, Ontario, Canada, K0J 1H0

For Office Use Only

Date Received _____ Time Received _____ Initials _____

Forwarded to IC ☐ Yes ☐ No Date Sent _____ Initials _____