



Township of Amaranth

374028 6th Line

Amaranth, ON L9W 0M6

P: 519-941-1007 F: 519-941-1802

info@amaranth.ca

Complaint Form

Complainant Information

Name: _____

Address: _____

Phone: _____

Email Address: _____

Address of Complaint: _____

Summary of Complaint:

Please note: all complaints will be dealt with accordingly. By signing this form, you agree to participate as a witness, as required, in any court proceedings, resulting from this complaint. Confidentiality will be adhered to under the Freedom of Information and Protection Act to the best of our ability, however, should a charge be laid by the By-law Enforcement Officer, your name may be required to be released in the event of court action.

Email the completed form to info@amaranth.ca.

Signature of Complainant

Date

By-law Contravened:

Action Taken:

Status:
