



Building & Property Services Complaint Form

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| <input type="checkbox"/> Dangerous or unsightly premises (Policy 66150-01) | <input type="checkbox"/> Solid waste (Bylaw D20) | <input type="checkbox"/> Land use bylaw (Bylaw P2) |
| <input type="checkbox"/> Minimal standards for residential occupancies (Bylaw P4) | <input type="checkbox"/> Building bylaw (Bylaw D6) | <input type="checkbox"/> Other |

Complaint information

Date of complaint: _____
 Civic number: _____ Street name: _____
 Owner's name: _____

Details of complaint (be as specific as possible, including items causing complaint)

Complainant information

The Complainant must provide contact information and sign the complaint form. Failure to do so will result in the complaint not being investigated.

Complainant's name (first and last): _____
 Civic number: _____ Street name: _____
 Postal code: _____ Phone number: _____
 Signature: _____

Office use only

Date complaint received: _____

Notes:
