

TOWN OF KYLE COMPLAINT FORM

(For Public Use Only)

The Town of Kyle has a policy for receiving and handling complaints from anyone who may be dissatisfied with service, actions or lack of action by a Town department or staff member, or has a complaint under any policy or bylaw of the town. Only formal complaints will be followed up on. Please complete this form to file a formal complaint.

COMPLAINANT CONTACT DETAILS

First Name:	Last Name:	
Email Address (considered the mo	st prompt way we can communica	te with you)
Mailing AND Civic Address		
Phone Number:		
COMPLAINT TYPE		
☐Access of Services ☐Staff Conduct ☐Bylaw/Policy Enforcement	□Programs □Processes or Procedures □Other	☐Facilities ☐Timelines of Services
SUMMARY OF COMPLAINT		
Please record information on wha If there is not enough space to de	• • • • • • • • • • • • • • • • • • • •	dates, and times. Be as detailed as possible ra paperDe
Service area/location or address of p	problem	
Persons involved (if known and appl	icable)	
List of enclosures (include copies of	any documentation/photographs i	n support of the complaint)
Details of Complaint:		

NOTICE OF COLLECTION

The personal information you choose to provide on this form is collected under the authority of the *Local Authority Freedom of Information and Protection of Privacy Act (LAFOIP)*. The information you provide will be used to investigate the complaint internally and potentially with third-parties for the purposes of investigation, as well as enforcement under municipal, provincial, or federal laws and regulations, and used for contact purposes.

Complainant's Signature:	Date:

FOR OFFICE USE ONLY

Receiver Initials	Tracking Number:			
Investigations				
investigation:				
Signature	DATE			
Signature	DATE			
Investigation:				
	DATE			
RESOLUTION:				
<u>-</u>				
	DATE			
· · ·				
Format (phone calls must be folion	owed up in writing):			
APPEAL: Brought to Council at meeting date:				
:	Date:			
Complainant notified by whom:				
Format (phone calls must be followed up in writing):				
NOTES: (Use additional paper if required				
	Investigation: Signature Investigation: Signature RESOLUTION: Signature Complainant notified by whom: Format (phone calls must be following date:			