

**Township of Georgian Bay
Code of Conduct
Complaint Form**

Please Note – Complaints shall be sent either directly to the Integrity Commissioner or delivered to the Township office in a sealed envelope to be sent to the Integrity Commissioner.

**Clerk’s Staff can Commission the Affidavit separately,
but do not see this form.**

Name of Complainant: _____

Nature of Complaint (i.e. Discrimination, Harassment, Other):

Person(s) Against Whom Complaint Laid: _____

Particulars of Complaint: (Set out all facts on which complaint is based including dates and times, the identity of any witnesses and a description of the steps, if any, already taken to attempt to resolve the matter. Refer to sections of the Code of Conduct and attach additional pages if necessary. Also, attach any supporting documents or evidence that may be of assistance in the investigation)

I, _____, request that a formal investigation in respect of the foregoing complaint be undertaken pursuant to the Township of Georgian Bay's Code of Conduct Policy. I understand and acknowledge that this investigation will involve the collection of personal information about me, and I consent to the collection of this information.

Signature _____

Date _____

NOTE: Personal information on this form is collected pursuant to the Municipal Act and The Corporation of the Township of Georgian Bay Code of Conduct By-law 2016-67 and will be used to follow up on complaints made under the Code of Conduct policy. Questions about the collection of this information should be directed to the Clerk, 99 Lone Pine Road, Port Severn, ON L0K 1S0 (705) 538-2337.