



TOWN OF RIMBEY

Complaint Form

(Confidential)



4938 - 50th Avenue
PO Box 350
Rimbey, AB. T0C 2J0
P. 403-843-2113
E. enforcement@rimbey.com

This form represents a request to resolve a bylaw or provincial issue in town. In order for the Municipal Community Peace Officer or Bylaw Enforcement Officer to proceed with an investigation and follow-up on your complaint, it is mandatory that you provide your full name, current address and phone number along with your signature below.

DATE: _____ TIME: _____ (AM PM) COMPLAINT CATEGORY: _____

COMPLAINANT INFORMATION

Name of Complainant: _____

Mailing Address: _____ Postal Code: _____

Civic Address: _____ Apt. Number: _____

Telephone #: (Day) _____ (Evening) _____

VIOLATION INFORMATION

Location of Offence (Civic Address): _____

Property Owner/Tenant Name (if known): _____

NATURE OF COMPLAINT (How it affects you, how long it has existed, License plate #, etc.): _____

Signature of Complainant

NOTE: Anonymity will be maintained between the complainant and the alleged offender, except where necessary in court of law. However should this complaint proceed to court, you may be required to give evidence as a witness and your name and your filed complaint will become a matter of public record.

PERSONAL INFORMATION: This information is being collected for the purpose of conducting a Bylaw or Provincial Enforcement Investigation. The information may be shared with applicable Town of Rimbey departments and agencies for the purpose of initiating appropriate action relative to this report. The collection of personal information on this application is authorized and protected under the Freedom of Information and Protection of Privacy Act, Section 33(c). By providing this information, you have consented to its use for the above purposes. If you have questions about the collection and use of this information, you may contact the Municipal Community Peace Officer or Bylaw Enforcement Officer.



ADDITIONAL NARRATIVE:

Initial _____

FOR OFFICE USE ONLY (to be filled out by Municipal Staff) _____ PHONED IN

_____ IN PERSON – Taken By: _____

Legal Address: Lot: _____, Block: _____, Plan: _____, Roll Number: _____

Owner(s): _____

Address: _____ (Postal Code) _____

Telephone #: (_____) _____

COMMUNITY PEACE OFFICER:

OCCURRENCE NUMBER:

Bylaw Violation: Yes _____ No _____

File Concluded: DATE: _____

OFFICER: _____