



Municipal Complaint Form

The Corporation of Municipality of East Ferris is committed to continuous organizational improvement in an environment where all complaints are dealt with fairly in a respectful, transparent fashion. Complaints must be made in writing.

Please provide us with your contact information. Anonymous complaints will not be accepted.

First Name: _____ Last Name: _____

Address & Street Name: _____

P.O. Box Number: _____ City: _____ Postal Code: _____

Home Telephone: _____ Cell Telephone: _____

Email Address: _____

What is your complaint? Please include relevant date(s), location, and background information, including municipal employees you have contacted regarding this matter. Additional space is available on the back of this form. Additional information, such as relevant photographs, can be sent via email.

How could the situation be improved?

Appendix A - GOV-006 – Complaint & Service Request Handling Policy

Thank-you for taking the time to explain your concern. Your complaint will be addressed as per our Complaint & Service Request Handling Policy. If you have any questions about the process, please contact the Clerk at 705-752-2740.

Please return completed forms to:

Clerk's Office
Municipality of East Ferris
390 Highway 94
Corbeil, ON P0H 1K0
Telephone: 705-752-2740
Email: monica.hawkins@eastferris.ca

For Office Use Only

Complaint Number: _____

Received by: _____

Date: _____

Forwarded to: : _____

Date: : _____

Acknowledgement Letter Sent: : _____

Date: _____ By: _____

Decision on Complaint/Action Taken:

Final Response Letter Sent: _____

Date: _____ By: _____

Copies Filed with Clerk:

Initial Complaint:

Acknowledgement Letter:

Investigation Correspondence:

Final Decision Letter: