



Schedule "A" - Council Code of Conduct Formal Complaint Form

About the Applicant

Full Name _____

Address _____

Phone _____

Email _____

I, _____ (insert full name), of _____
(insert City, Town, etc. of residence) in the Province of Ontario, have personal knowledge
of the facts as set out in this Complaint Form, because:

(insert reasons – e.g. I work for /I attended a meeting at which, etc.) and have reasonable
and probable grounds to believe that a council member of the Township of Carling Council,
namely:

_____ (insert name of member) has contravened section(s)

_____ (specify section(s) of the Council Code of Conduct
of the Township of Carling.) The particulars of which are as follows:

(If more room is required, please use Schedule "A" to set out the statement of facts in consecutively numbered paragraphs, with each paragraph being confined as far as possible to a particular statement of fact. If you wish to include exhibits to support this complaint, please refer to the exhibits as Exhibit A, B, etc. and attach them to this Complaint Form).

PLEASE READ BEFORE SIGNING: If the Integrity Commissioner launches an inquiry into a complaint then the content of this form, including the complainant's identity, will typically be shared with the Member who is the subject of the complaint. Also, at the end of the inquiry the Integrity Commissioner may issue a public report that includes information about the complaint, including possibly the identities of the parties involved. Only sign this complaint form if you understand and accept the potential for disclosure of your identity and the information you provide.

I request that this matter be reviewed by the Township of Carlings's Integrity Commissioner.

(Signature of Complainant)

(Date)

Personal Information on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and The Corporation of the Township of Carling's Council Code of Conduct and will be used to conduct an investigation on the details of the complaint. Questions about the collection of this information should be directed to the CAO/Clerk, The Corporation of the Township of Carling, 2 West Carling Bay Road, Nobel, ON P0G 1G0, 705-342-5856, clerksoffice@carling.ca

