Box 130 1191 Rd. 96, Wolfe Island, Ontario K0K 2Y0

50 Baseline Road, Gananoque, Ontario K7G 2V6

Complaint Form

Please complete the following form to submit a formal complaint. This information will help us investigate and respond appropriately.

1. Complainant Information
Full Name:
Phone Number:
Email Address:
Mailing Address:
2. Details of the Complaint
Date of Incident: / /
Time of Incident (if known):
Location of Incident:
Describe what happened (please provide as much detail as possible):
I confirm that the information provided above is true and accurate to the best of my knowledge.
Signature:
Signature: Date: / /
Office Use Only
Complaint Received By:
Date Received: /
File/Case Number:
Follow-up Actions Taken