



## BYLAW COMPLIANCE COMPLAINT FORM

**Address of Property Where Alleged Violation is Taking Place:**

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**Complaint:**

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**Name of Complainant:**

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**Home Address of Complainant:**

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**Telephone No:** \_\_\_\_\_

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Complainant**

*NOTE: ANONYMITY WILL BE MAINTAINED AT ALL TIMES BETWEEN THE COMPLAINANT AND THE ALLEGED VIOLATORS, EXCEPT WHERE NECESSARY IN A COURT OF LAW.*

Township of Georgian Bluffs  
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