

TOWNSHIP OF MCNAB/BRAESIDE COMPLAINT POLICY

(Official complaint form on page 2 of this document)

A. Policy Statement

- The Property Standards By-Law will be enforced on a basis of written complaints, unless the Property Standards Officer is aware of an obvious unsafe condition warranting correction.
- 2. The Property Standards Officer will not inspect the entire premises or suite, but will inspect only those items which are the subject of the written complaint.
- 3. Notwithstanding item 2, the Property Standards Officer may inspect other areas or items believed to be unsafe.
- 4. Where applicable, names of complainants shall not be revealed. The intent of this policy is to prevent the complainant(s) from being harassed or suffering retaliatory measures and to comply with the Freedom of Information and the Protection of Privacy Act requirements.
- 5. Copies of petitions which refer to possible infractions of the Property Standards By-Law shall not be distributed to the general public unless the names and addresses of the petitioners are first deleted.

B. Filing if a Complaint

A complaint *must be in writing, dated and signed by the complainant*, and delivered to the CAO/Clerk. The written complaint must include the following (where applicable):

- 1. Location of incident or concern.
- 2. Date incident or concern occurred.
- 3. Name of property owner, where applicable.
- 4. Details of incident or concern.
- 5. Complainants name, address and phone number.
- 6. Signature of complainant.

C. Time Frames

- 1. The complaint will be reviewed by the Property Standards Officer and a copy will be given to the By-Law Enforcement Department Head.
- 2. All written complaints will be dealt with expediently, or as appropriate to the circumstances.
- 3. A response will be provided when the complaint has been addressed.



OFFICIAL COMPLAINT FORM

| Complainant: | | | | |
|--|-------------------------------|-----------------------|---------|------------------------|
| Name: | Address: | | | |
| | | | | |
| Phone numbers: (mandatory) | | | | |
| I hereby request an inspector Township. | r to commence a | action under t | he appr | opriate By-law for the |
| I hereby further declare that this complaint at any hearings | | | | |
| Complainant's signature: | | Date: | | |
| Complaint Lodged against/ | Location of Cor | mplaint: | | |
| Address: | | Name: | | |
| Phone numbers (if available): | | | | |
| Action taken (if any): | | | | |
| Date of Offence: | | Time (if applicable:: | | |
| Nature of Complaint: | | | | |
| | | | | |
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| | | | | |
| Office Use Only: () 1st Complain | int () 2 nd Compla | aint () Subs | sequent | Inspectors Initials: |
| Date Received: | | Time: | | |
| Date of Inspection: | • | | | |
| Notes: | | | | |
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