

**COMPLAINT INTAKE FORM
MUNICIPAL CLOSED MEETING INVESTIGATION**

**IN ACCORDANCE WITH
Section 239 of the Municipal Act 2001 (as amended)**

**PLEASE FORWARD COMPLETED FORM IN A SEALED ENVELOPE MARKED
“PRIVATE AND CONFIDENTIAL” TO:**

**TOWN OF NIAGARA-ON-THE-LAKE
1593 FOUR MILE CREEK ROAD
P.O. BOX 100
VIRGIL, ON L0S 1T0**

ATTENTION: TOWN CLERK

ACTION	Note any activities you have taken to try to resolve the matter.

SUMMARY / ADDITIONAL COMMENTS

Date of Signature

Signature of Complainant