

PLANNING DEPARTMENT COMPLAINT FORM

As per Yellowhead County Council direction, the Planning Department will act only on complaints that have been submitted in writing. We have prepared a brief complaint form for you to complete and return at your convenience, at which time the Planning Department will act upon your concerns.

The following information will be treated as confidential. If complainant will not give name, we cannot act on the complaint.

COMPLAINANT CONTACT INFORMATION REQUIRED

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Name			,			Telephone	
Mailing Address			City/To	own			
Postal Code		Email Addre	ess				
Legal Location				Rural Addres	ss		
NATURE OF COMPLA	AINT/REQUEST						
Owner of Property							
Legal Location (legal land/ street address)							
City/Town			Rural A	Address			
DETAILS OF COMPLA	AINT:						
This personal information is be Land Use Bylaw and will be use of Information and Protection of and County solicitors. If you he County 2716 – 1 Ave., Edson A	ed to investigate and enforce pr f Privacy Act, Statutes of Albert ave any questions about the co	rovincial and mui ta. Disclosure of	nicipal legi f personal i	slation. It is prote information collect	cted i	by the privacy pro n this form will be	visions of the Freedom limited to the R.C.M.P.
Signature			Date				