



Complaint Submission - APS

Instructions: Please complete and submit this form within 30 days of the date of the event for which the complaint is being made.

This form is intended for complaints or concerns regarding the administration of the Municipality's Administrative Penalty System (APS). If you wish to dispute a Penalty Notice you have received, please complete a request for a Screening Review and/or Hearing Review, as applicable.

Your feedback is important to us to help ensure our services are meeting your needs.

Please note that anonymous complaints will not be accepted.

You may withdraw your complaint at anytime by notifying the Director of Legislative Services in writing at clerk@meaford.ca with subject line - APS – compliant withdrawal.

Section 1 - Contact Information

First Name: _____ Last Name: _____

Phone Number: _____ Email Address: _____

Street Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Mailing Address (if different than above):

City/Town: _____ Province: _____ Postal Code: _____

Section 2 - Complaint Details

Please provide the details of your complaint. Include dates, locations, what occurred, and any relevant context:

Name of staff person(s) involved, if known: _____



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Please provide details on how you would like to see your complaint resolved:

Section 3 - Supporting Documents

Please attach any supporting documents for your complaint submission.

Section 4 – Submitting the Form

Payment Options:

- 1. Online:** Pay invoice with Penalty Notice # through the Municipality's website:
www.meaford.ca/aps
- 2. In Person:** At the Administrative Office located at 21 Trowbridge Street West, Meaford during regular service hours (8:30 a.m. to 5:00 p.m. Monday to Friday). Payment may be made in cash, cheque, money order, debit card or credit card.
- 3. By Mail:** Mail a cheque or money order made payable to the Municipality of Meaford. Please write your Penalty Notice number on the front of the cheque or money order. Do not mail cash. Mail to: Municipality of Meaford – By-law Services 21 Trowbridge Street West, Meaford, ON N4L 1A1

Section 6 – Signature

By signing this form, I certify that all information provided is true and accurate. I will notify the Municipality if any of the information changes before the review date.

Signature: _____

Date: _____

All personal information collected on this form is protected under the *Municipal Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of processing your request.