



TOWN OF KILLAM
P.O. Box 189 Killam, AB T0B 2L0
Phone (780) 385-3977 – Town Office

COMPLAINT FORM

NOTE: Once the complaint is received at the Town Office, we will forward it to our Bylaw Enforcement Officer. Please include only the facts and details that you have actually witnessed. It is important that you state a SPECIFIC time and date.
Example: Sept. 7, 20____ at 1:15 p.m.

COMPLAINANT: Name _____
Address _____
Phone _____

OFFENCE: Date of Offence _____
Time of Offence _____ o'clock a.m./p.m.
Location of Offence _____
Description _____
Owner's Name (if known) _____
Address of Owner _____

DETAILS: _____

Date Signed _____ Signature _____
Complainant may be required to give evidence, should this matter go to court.