



## DISTRICT OF LILLOOET BYLAW COMPLAINT FORM

If completing this form on a computer, you *must* use Adobe Acrobat. It will *not* work in a web browser. Acrobat Reader is free to [download here](#). You may also print this form and submit it in person at **Municipal Hall** located at 615 Main St, or by mail to **Attn: Bylaw Department, District of Lillooet, PO Box 610, Lillooet, BC, V0K 1V0**.

Staff Filing Complaint:

*(District Office Use)*

File No.

*(District Office Use)*

Full Name:

Street address:

Mailing address:

City:

Postal Code:

Telephone:

*i.e. (250) 256-\_\_\_\_\_*

Date:

*i.e. YYYY-MM-DD*

Signature:

### **Nature of Complaint:**

*(Provide all details, including general description of complaint, location, address, person involved, time and date of incident, etc.)*

*(use reverse side if necessary)*

**Nature of Complaint (continued):**

This information is kept confidential but is subject to the provisions of the *Freedom of Information and Protection of Privacy Act*.

Forwarded to:

*(District Office Use)*

Date:

*(District Office Use)*

Careful! This will delete everything you've typed.

This will open your email program to send the form.