COMPLAINT OF NON-COMPLIANCE
Township of Howick
Property Standards By-law
Canine Control By-law

All fields must be completed to be processed

Your name:	
Phone number:	
Email address:	
Mailing address:	
What is your preferred method of contact?	

Name of Owner in Violation:

Address of property in Violation:

Description of Violation (please include any background / further information in detail. Any additionals - such as photographs, can be attached to this form)**:**

_____

Date & Time of Infraction: _____

I hereby certify that the statements contained herein are true and for no vexatious purpose. I hereby further declare that if required, I will provide or present evidence in support of this complaint at any hearings of Appeals Committee or Court of Law.

_____ _____
Date Signature of Complainant

Please forward to:
Township of Howick
44816 Harriston Rd.
RR 1 Gorrie, ON N0G 1X0
bylaw@howick.ca

Personal Information contained on this form is collected under the authority of the *Municipal Act* for the purpose of responding to and tracking complaints. This information will be kept confidential.