

# **City of Pembroke Complaint Form**

The Corporation of the City of Pembroke is committed to continuous organizational improvement in an environment where all complaints are dealt with fairly in a respectful,

transparent fashion. after the alleged eve	Complaints must be made in writing within seven (7) calendar days
Please provide us with your contact information.	
First Name:	

First Name.
Last Name:
Address Number & Street Name:
P.O. Box Number:
City:
Postal Code:
Home Phone Number:
Cell Phone Number:
Email Address:

### What is your complaint?

Please include relevant date(s), location, and background information, including municipal employees you have contacted regarding this matter. Additional space is available on the back of this form. Additional information, such as relevant photographs, can be attached to this form.

## How could the situation be improved?

Thank-you for taking the time to explain your concern. We will provide a response to your concern within thirty (30) calendar days of receiving your complaint. If you have any questions about the process, please contact the CAO/Clerk at 613-735-6821.

### **Additional Information:**

#### Please return your completed form:

CAO/Clerk's Department, City of Pembroke, 1 Pembroke Street East, Pembroke, ON, K8A 3J5

Telephone: 613-735-6821 Fax: 613-735-3660

Email: City of Pembroke or use our feedback form

Personal Information on this form is being collected under the authority of the Freedom of Information and Protection of Privacy Act, R.S.O. for the purposes of improving customer service. Questions about collection of personal information may be directed by mail to the address above.