YUUŁU?IŁ?ATḤ FIRST NATION

Public Order Peace and Safety Act Department of Lands and Resources Animal Control Regulation Form AC-04



Date:	 	
File no:	 	

COMPLAINT INVESTIGATION REPORT

COMPLAINANT CONTACT INFORMATION

(for Department of Lands and Resources use only)

Name:	
Phone #s:	
Civic Address:	
Email Address:	

NATURE OF COMPLAINT

Infraction:				
Date of Infraction:				
Description:				
How long has this problem existed:				
Address where infraction is taking place:				
Alleged Offender & Contact (if known):				
Property Owner & Contact (if known):				

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ACTION TAKEN

Date	Officer	Action Taken		
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Name of Dept C				
Action Requeste				
Action Request	за бу Берг.			
OUTCOME				
Date			Outcome	
Date			Staff Signature	
			- -	
			Print Name	
			Lands Manager Signature	
Date Concluded	1	•	Print Name	
Additional follo	 ow-up required:			