



Schedule "A" – Municipality of Wawa Formal Complaint Form

Name	
Address	
Phone Number	
Email	
Please provide the details your complaint, including relevant dates, times, location, and background information that might include municipal employees you have contacted to resolve the complaint, witnesses to the incident, photographs, etc.	
Do you have a recommendation or suggestion as to how to improve the situation or resolve the complaint?	

Complainant Signature: _____ Date: _____