

Code of Ethics Complaint Form

Ema Civic Lega	Address: Il Land Descript	 ion - Lot:	Blk/Par: wnship:	Plan No.:		Ext.:	
This reasonable object	onably possible ctive and impar rmal Code of Etl	ll be kept stric , protect the n tial manner. hics Complain	names and identi	ties of all part	ties involved a	o this matter will, as is nd be conducted in an	
has o			f Ethics Bylaw b cation of conduc	-	the following:		
B.	What section	n of the Code (of Ethics Bylaw I	nas been cont	ravened:		
C.	Please provid	de the particu	lars and names (of all people ir	nvolved, and o	f all witnesses:	



Code of Ethics Complaint Form

D.	Please provide contact information (if possible) for all people involved and all witnesses:					
E.	Please describe the situation or event and why it is a code of ethics violation:					
•	require more space, please attach additional pages to this form. itional Information					
Do y	u have supporting evidence: Yes 🔲 No 🔲					
-	how many pages of additional evidence:					
3. De	aration					
l,	, hereby declare that the information provided by me with respect to					
the a	ove statement is true in all respects. I understand that signing a false affidavit may expose me to cution under the Criminimal Code of Canada.					
Sign	cure: Date:					
	Office Use Only					
	Date Received: Received by:					
	Reference #:					