



(Office Use Only)

INQUIRY / ACTION / CONCERN FORM
(For Public use)

Name: _____ Date: _____

Contact Information:

Phone: _____ (primary) _____ (cell) _____ (other)

General Nature of Inquiry/Action/Concern:

Location of the Inquiry/Action/Concern(if applicable):

Additional Details:

For Office use only below here

Assigned to: _____ Date: _____

Action Requested/Follow Up (to be completed by the appropriate department or designate with regular updates provided to the administration staff until completion):

Department Supervisor Signature

Date Completed

Return to: 110 Main St. Box 129 Sundridge, ON, P0A 1Z0 or by email at admin@sundridge.ca.

The information collected on this form is collected under the authority of the Municipal Act, S.O. 2001, c.25, as amended. Pursuant to Section 31 (b) of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56, the personal information collected will be used for the purpose of identifying and responding to service delivery issues within The Village of Sundridge. Questions about collection can be addressed to the Clerk Administrator, Village of Sundridge, 110 Main Street, PO Box 129, Sundridge ON, P0A 1Z0, clerk@sundridge.ca.