



***How do you suggest the situation be improved or complaint resolved?***


**OFFICE USE ONLY**

COMPLAINT #			
RECEIVED BY		DATE	
FORWARDED TO		DATE	

<input type="checkbox"/> Acknowledgement Letter Date sent: _____ Staff name: _____	<input type="checkbox"/> Additional correspondence Date sent: _____ Staff name: _____
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**ACTION TAKEN**


<input type="checkbox"/> Final Decision Letter Date sent: _____ Staff name: _____	Copies filed with Clerk <input type="checkbox"/> Initial complaint <input type="checkbox"/> Acknowledgement letter <input type="checkbox"/> Additional correspondence <input type="checkbox"/> Final Decision letter
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***Thank you for taking the time to express your concern(s).  
We will provide a response within thirty (30) calendar days of receiving your complaint.  
If you have any questions about this process, please contact the  
Clerk 519-848-3620 ex 4227 or [kwallace@wellington-north.com](mailto:kwallace@wellington-north.com)***