

# RURAL MUNICIPALITY OF VANSCOY

306-668-2060  
[connect@rmvanscoy.ca](mailto:connect@rmvanscoy.ca)  
Box 187, Vanscoy, SK S0L 3J0



## BYLAW ENFORCEMENT COMPLAINT FORM

Please complete the information below and respond to all questions to the best of your ability.

The following information was provided and received in confidence.

We hereby inform all complainants that this form will be regarded as a legal document, and the statement provided may be employed as evidence in a court of law. The complainant shall be required to testify to the alleged complaint.

### COMPLAINANT INFORMATION

Date of Complaint:

Name of Complainant:

Residential Address:

Mailing Address (if different from above):

Email Address:

Phone Number:

### INCIDENT INFORMATION

Location of Incident or Alleged Offence:

Address or Land Location:

Other Description (if required):

Name or Registered Owner:

Address of Owner:

Detailed Description of Alleged Bylaw Violation:

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## CONFIDENTIALITY ISSUES

The anonymity and confidentiality afforded to complainants and alleged violators under Council policy cannot be guaranteed if the investigation results in court proceedings.

I CONFIRM THAT I HAVE READ THIS FORM AND UNDERSTAND THAT THE RM OF VANSCOY WILL BE UNABLE TO GUARANTEE CONFIDENTIALITY OF THE ABOVE INFORMATION IF THIS MATTER RESULTS IN COURT ACTION.

DATE:

SIGNATURE OF COMPLAINANT: