



## BYLAW COMPLAINT FORM

County of St. Paul  
5015 49 Avenue, St. Paul, Alberta, T0A 3A4  
[www.county.stpaul.ab.ca](http://www.county.stpaul.ab.ca)

*Our Mission – To create desirable rural experiences*

*This form represents a request to resolve a Bylaw Enforcement issue. For the Municipal Bylaw Enforcement Officer to proceed with an investigation and follow up of your complaint, you must provide your full name, current address and phone number, and signature. Anonymous complaints will not be accepted.*

*Anonymity will be maintained between the complainant and the alleged offender, except where necessary in a court of law. However, should this complaint proceed to Court, you may be required to give your name and evidence as a witness, and your filed complaint will become a matter of public record.*

DATE: \_\_\_\_\_ NAME OF COMPLAINANT: \_\_\_\_\_

LOCATION OF BYLAW VIOLATION OFFENCE (Physical Address): \_\_\_\_\_

NATURE OF COMPLAINT (how it affects you, how long it's been). If printing, use reverse side if needed:

Property Address of Complainant: \_\_\_\_\_

Mailing Address of Complainant (include postal code): \_\_\_\_\_

Phone: \_\_\_\_\_ Complainant Signature: \_\_\_\_\_

This information is being collected to conduct a Bylaw Enforcement Investigation. The information may be shared with the applicable County of St. Paul departments to initiate appropriate action relative to this report. The collection of personal information on this application is authorized and protected under the Protection of Privacy Act, Section 4(c). By providing this information, you have consented to its use for the above purposes.

If you have questions about the collection and use of this information, you may contact the ATIA/POPA Coordinator.  
County of St. Paul | 5015 49 Avenue, St. Paul AB | T0A 3A4 | 780-645-3301