



Town of Coalhurst
100 – 51st Avenue, Box 456, Coalhurst, Alberta T0L0V0
Ph: (403)-381-3033 Fax: (403)-381-2924

Complaint Form

Complainant Information

(Print Clearly)

Date of Complaint: _____

Time: _____ AM PM

Name: _____

Mailing Address: _____

Physical Address: _____

Phone: (Home) _____ (Cell) _____ (Work) _____

E-mail: _____

Are you willing to testify in court? YES NO

Nature of Complaint (use the back of this form if more space is required)

Complainant Signature: _____ **Date:** _____

This information is being collected under the authority of the Town of Coalhurst. This information is protected by the privacy provisions of the Freedom of Information and Protection Privacy Act. For more information contact the Town of Coalhurst FOIP Coordinator at 403-381-3033.

