MORIN-HEIGHTS
1855

COMPLAINT AND REQUEST FORM

CONFIDENTIAL

Plaintiff's Name:_____ Phone N°: _____

Email: _____

Address of the nuisance: _____

Description of the nuisance or request :

_____

_____

_____

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_____

SPACE RESERVED FOR THE TOWN PLANNING AND ENVIRONMENT DEPARTMENT

Inspection date: _____

Inspector: _____

Resume of the inspection :

_____

_____

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_____

_____

Follow up:

- ☐ Close the request or complaint
- ☐ Follow up with notice of offense N°: _____

Signature: _____ Date : _____