



Municipality of North Perth
330 Wallace Avenue North
Listowel, ON N4W 1L3

REQUEST FOR A CLOSED MEETING INVESTIGATION

Pursuant to Section 239(1) as amended of the Municipal Act, 2001

Please note:

- All requests for investigation will be reviewed by the Meetings Investigator who will decide if an investigation is warranted

Part 1: Requester Information

Name: _____

Mailing Address: _____

Telephone: Home Number: _____ Work Number: _____

Cell Number: _____

Email address: _____

Do you consent to having your identity revealed during the investigation?

Yes No

Please note: Personal information is collected under the authority of Section 239 of the Municipal Act, 2001, as amended and will be used by the Municipal Investigator to carry out an investigation under the Act.

Part 2: Meeting Particulars

Name of Municipality: The Municipality of North Perth

Name of Local Board or Committee (if other than Council): _____

Date of Closed Meeting: _____

Municipal Contact Name: Sarah Carter, Acting Clerk

Telephone: 519-292-2062

Part 3: Background: (This should provide as much information as is required to explain the nature and background of the particular occurrence. (i.e. reason provided for closed meeting session, reason for complaint etc.)

Part 4: Action

Have you approached municipal staff to resolve this matter Yes No

If yes, who? _____ Date of contact: _____

Other activities that the requestor has undertaken to resolve the matter:

Any other information deemed relevant by the requestor:

Signature of Requestor

Date

PLEASE FORWARD COMPLETED FORM IN A SEALED ENVELOPE MARKED "PRIVATE AND CONFIDENTIAL" TO:

Sarah Carter
Municipality of North Perth
330 Wallace Avenue North Perth
Listowel, ON N4W 1L3