

Town of Lake Cowichan

Bylaw Complaint form

Your Information	
Name:	Phone number:
Address	
Subject of the Complaint: Dog Con	Noise Unsightly premises nplaint Other
Name:	
Address:	
Details of the complaint (please use additional paper if required):	
For Office Use	
Passed to Bylaw Officer:	
Parant Outoprop	
Report Outcome:	
Date Closed:	