



House of Assembly
Province of Newfoundland and Labrador
Office of the Citizens' Representative

4th Floor, Beothuck Building 20 Crosbie Place P.O. Box 8400, St. John's, NL A1B 3N7
Telephone (709)729-7647 Toll Free 1-800-559-0079 Facsimile (709) 729-7696 E-mail: citrep@gov.nl.ca
www.citizensrep.nl.ca

Please complete and return to the Office of the Citizens' Representative at the address noted above.

Name: _____

Address: _____

Home Phone: _____ **Alternate Phone:** _____ **Fax:** _____
(if applicable)

E-mail Address: _____

Electoral District: _____

1. Which authority (government agency/department) is your question of complaint about?
(Please identify by specific name)

2. Who have you dealt with? (list any names, titles, phone numbers or addresses that you have.
If none, please state "None")

3. Summarize your complaint and any steps you have taken to try to resolve it: (please indicate
any file or reference numbers and relevant dates).

4. Did you file an appeal or apply for a review? (Circle one) **Yes** **No**
If yes, when was the last appeal or review and what was the result?

5. Why do you believe the actions are unfair?

6. How can this complaint be settled?

7. If you consider the matter urgent, explain why.

The information provided by you is protected from disclosure by Section 30.1(c) of the *Access to Information and Protection of Privacy Act* and by Sections 13(1) and 27 of the *Citizens' Representative Act*. It is used only for purposes relevant to an investigation, inquiry, or the reports generated by the investigation or inquiry. It will only be disclosed without your permission where there is a lawful duty by the Citizens' Representative or his officers to do so. For more information, please call 1-800-559-0079 and ask to speak with the Access to Information and Privacy Coordinator.

I _____ hereby authorize the Citizens' Representative and/or his agents to access any and all documentation and written information or otherwise pertaining to my complaint, in accordance with Section 31.(1) of the Citizens' Representative Act.

Signature of Complainant

Date