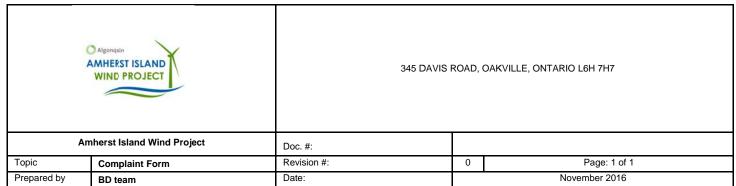
SCHEDULE 15 – Sample Complaint Response Form



	BD team		atc.			140 VEHIBEI 2010
TO BE COMPLETED BY AMHERST ISLAND WIND STAFF:						
	ate of Receipt	THE THE TABLE TO T			Complaint No.	
R	ecorded By				Date	
T	ype of Complaint	Substantial	General	Other	Resolution Date	
Complainant Information						
N	ame					
A	ddress					
Ci	ity / State / Zip					
E	mail					
T	elephone					
	arcel Description PID					
□ Permit Matter		□ Other	Nature of Complia			
D C	escription of omplaint					
Action(s) Taken						
T	escribe Action aken to Resolve ssue					
Final Resolution						
	escribe Final isposition					