**COMPLAINT FORM**

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| --- | --- | --- | --- | --- | --- |
| **DATE:** | | |  | | |
| **NAME:** | |  | | | |
| **ADDRESS:** | |  | | | |
| **PHONE #:** | |  | | | |
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| **ISSUE:** | | | | | |
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| For SPWD Use  **SPWD COMPLAINT NUMBER:** | | | | | |
| **RESOLVED (HOW & BY WHOM):** | | | | | |
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|  | | | | | |
|  | | | | | |
|  | **RESOLUTION DATE:** | | | |  |

Please forward to SPWD at 377 Scott Point Drive, Salt Spring Island, BC V8K 2R2,

or by email or phone to any trustee. Please see www.scottpointwaterworks.com/contact/