Application for a *Municipal Conflict of Interest Act* Investigation

Use this form to file an application for an investigation under the *Municipal Conflict of Interest Act* pursuant to section 223.3 (1) of the *Municipal Act, 2001*, about Members of Council and local boards.

Fields with an asterisk (*) are required.

Part 1: Complainant Information

First Name*:	Last	Name*:	
Click or tap here to enter text.	Click or tap here to enter text.		
Address*:			
Click or tap here to enter text.			
City/Town*:	Province*:	Postal Code*:	
Click or tap here to enter text.	Click or tap here to enter t	ext. Click or tap here to enter text.	
Phone Number*:	Email Address:		
Click or tap here to enter text.	Click or tap here to enter text.		
I am an elector as defined by section 17 of the <i>Municipal Elections Act, 1996</i> *.			
	olic's interest:	why you believe you are acting in	

Part 2: Alleged Contravention

Who do you believe contravened the *Municipal Conflict of Interest Act* *? Select one.

Member(s) of Council Member(s) of Local Board: Click or tap here to enter text.

Name of Board

Name(s) of Member(s):

Click or tap here to enter text.

What section(s) of the *Municipal Conflict of Interest Act* do you believe were contravened*? Select all that apply.

Section 5 – The member participated in the discussion and/or voted about a matter in which the member has a direct or indirect pecuniary interest.

Section 5.1 – The member failed to file a written statement of a declared interest.

Section 5.2 – The member used their office to attempt to influence a decision or recommendation of an officer or employee of Halton Region and/or the local board about a matter in which the member has a direct or indirect pecuniary interest.

Part 3: Description of the Alleged Contravention

Why do you believe the Member has contravened the *Municipal Conflict of Interest Act**? If you require more space, please use additional pages.

Sample wording: I believe that [Member's name] contravened section(s) [a, b, c] of the *Municipal Conflict of Interest* Act when they [description of actions].

Click or tap here to enter text.

Part 4:	Confirm	nation
🗌 Yes	🗌 No	I have attached supporting records and/or additional pages.
☐ Yes	🗆 No	I am making this application to request that the Integrity Commissioner conduct an investigation into a possible contravention of the <i>Municipal Conflict of Interest Act</i> .
🗌 Yes	🗆 No	I also intend to file a complaint regarding a possible contravention of the Halton Regional Council Code of Conduct (see separate form).

Part 5: Statutory Declaration

I, <u>Click or tap here to enter text.</u>, solemnly declare that I became aware of the alleged contravention described in this Application on <u>Click or tap here to enter text.</u>, and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath.

X

Signature of Applicant

Sworn or solemnly affirmed before me

at Click or tap here to enter text.

Municipality

in Click or tap here to enter text.

Province

on Click or tap here to enter text.

Date

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Signature

Signature of Commissioner

Click or tap here to enter text.

Print Name of Commissioner

Once completed, forward this application form and any attachments to Suzanne Craig, Halton Region's Integrity Commissioner, via email to <u>suzannecraigintegrity@gmail.com</u>.