

Request for Information: Closed Meetings

Pursuant to Section 239(1) of the Municipal Act, 2001, regarding a meeting or part of a meeting that was closed to the public.

Contact Information (All information is required.)

First Name:

Last Name:

Email:

Phone Number:

Street Address:

City:

Province:

Postal Code:

Closed Meeting Information

Name of municipality, local board, or committee:

Date of closed meeting:

Reason for Request

Please provide detailed information that is relevant to the subject matter, background and reasons for your request sufficient to establish reasonable and probable ground for an investigation.

By checking this box, I certify that all the information contained in this request for closed meeting investigation is true and correct to the best of my knowledge. I further agree to be contacted regarding the details of this request.

Collection of Personal Information

Personal information is collected under the authority of section 239 (1) of the Municipal Act, 2001 and may be used by the closed meeting investigator to carry out an investigation under the statute. If you have any questions regarding the collection, use or disclosure of this personal information, please contact the Municipal Clerk at clerk@middlesexcentre.ca or 519-666-0190.

→Please direct any questions and return this form to: Municipality of Middlesex Centre

10227 Ilderton Road, Ilderton, ON, N0M 2A0

519-666-0190 or 1-800-220-8968 | clerk@middlesexcentre.ca