

Form B Application for Inquiry into Alleged Contravention of the Municipal Conflict of Interest Act, R.S.O. 1990, c. M. 50 ("M.C.I.A.")

## **Applicant Information**

Applicant Name:		
Mailing Address:		
Phone Number:		
Email address:		

Applicant is (check one):

- [\_\_] an elector in the City of Oshawa
- [\_] an individual demonstrably acting in the public interest
- [\_] a corporation (including a municipality) demonstrably acting in the public interest

If the applicant is a Corporation, please identify the authorized representative for the purposes of this application: \_\_\_\_\_

## **Allegation Details**

I believe that (check one)

- a Member of the Council of the City of Oshawa
- a Director of the Board of Management of the Central Oshawa Business District Improvement Area

Name of the Member/Director who is the subject of the allegation:

Please note: You must complete a separate form for each member who is the subject of an allegation.

The Applicant alleges that the Member/Director contravened the following sections of the Municipal Conflict of Interest Act (check all that apply):

[]	Section 5
[]	Section 5.1
[]	Section 5.2

Questions about the collection of the personal information on this form should be submitted to the Integrity Commissioner directly by contacting Guy Giorno at IntegrityCommissioner@fasken.com

The following are the Applicant's reasons for believing that the Member/Director has contravened the above section(s) of the Municipal Conflict of Interest Act:

Please set out the statement of facts in consecutively numbered paragraphs. If more room is required, please attach additional pages, numbered accordingly. If you wish to include exhibits to support this complaint, please refer to the exhibits as Exhibit A, B, etc. and attach them to this form.

## Please read before signing:

If the Integrity Commissioner launches an inquiry into an allegation then the content of this form, including the Applicant's identity, will typically be shared with the Member/Director who is the subject of the allegation. Also, information on this form and information obtained during the inquiry, including possibly the identities of the parties involved, might be disclosed in the Integrity Commissioner's published reasons at the end of the inquiry and might be disclosed in an application to the Superior Court. Only sign this application form if you understand and accept the potential for disclosure of your identity and the information you provide.

By signing below, I, *(insert name)* \_\_\_\_\_\_ understand the above and apply to the Integrity Commissioner for an inquiry to be carried out concerning the alleged contravention.

Signature of Applicant (or representative if Applicant is a corporation)

Date

Note: The statutory declaration on the next page is a mandatory part of the application, required by the *Municipal Act, 2001*. It must be declared before a person authorized to take declarations in Ontario (including any Ontario lawyer).

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## DECLARATION Required by subsection 223.4.1(6) of the *Municipal Act*

I,	(insert full name), of	(city, town, etc.)		
of	(specify municipality),			
(add province/country if outside Ontario/Canada) solemnly declare that:				
(Choose one of the following by placing your initials in the respective box below)				
[]	I am the Applicant.			
[]	The Applicant is a corporation and I am its authorized representative.			
(Choose one by placing your initials in the respective box below)				
[]	I attest to the fact that the Applicant became aware of the Member/Dire contravention of the <i>Municipal Conflict of Interest Act</i> not more than six today.	•		
	[In a municipal election year:] I attest to the fact that the Applicant beca Member/Director's alleged contravention of the <i>Municipal Conflict of Int</i> the period of time starting six weeks before Nomination Day, and endin	<i>erest Act</i> within		
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.				

DECLARED before me at the \_\_\_\_\_(city/town) of \_\_\_\_\_\_(specify municipality) this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Commissioner of oaths, etc.

Applicant or Representative