



The Corporation of the City of Elliot Lake
45 Hillside Drive North
Elliot Lake, ON P5A 1X5

APPLICATION FOR INQUIRY FORM/AFFIDAVIT

MUNICIPAL CONFLICT OF INTEREST ACT, R.S.O. 1990, c. M.50

Name: _____
Home Address _____
(Street name, house #, P.O. Box #, city, postal code)
Mailing Address _____
(if different from home address)
Home phone #: _____
Cell phone #: _____
Email address: _____

***It is an offence under the Criminal Code of Canada to knowingly swear a false affidavit**

I, _____ [Print full name] of _____ [municipal address] in the Province of Ontario MAKE OATH AND SAY [or AFFIRM]: that [place an "X" next to one of the following]:

_____ I became aware of the alleged contravention(s) not more than six weeks prior to the date of this application;

OR

_____ I became aware of the alleged contravention(s) within the period of time starting six weeks before nomination day for the municipal election, and ending on voting day.

SCHEDULE "A"