

Request for an Inquiry: Conflict of Interest

Under Section 223.4,1(2) of the *Municipal Act*, a Member, an elector as defined in the *Municipal Conflict of Interest Act* or a member of the public demonstrably acting in the public interest may request the IC to conduct an inquiry about whether a Member has contravened Section 5, 5.1 or 5.2 of the *Municipal Conflict of Interest Act*.

Applicant's Full Legal Name*:

Applicant's Address*:

Applicant's Phone Number*:

Applicant's Email Address*:

1. Request for Inquiry

- I. A request shall be in writing and may only be made within six weeks of the applicant becoming aware of the alleged contravention.

NOTE: If both of the following are satisfied, the six week limitation period does not apply:

- 1) The applicant became aware of the alleged contravention within the period starting six weeks before Nomination Day for a regular election and ending on Voting Day; **AND**
- 2) The applicant makes the request for an inquiry within six weeks after Voting Day in a regular election.

- II. All requests shall be signed by an identifiable individual (including the signing officer of an organization).
- III. A request shall set out all reasonable and probable grounds for the allegation that the Member has contravened Section 5, 5.1 or 5.2 of the *Municipal Conflict of Interest Act* and shall include a supporting affidavit that sets out the evidence in support of the complaint.
- IV. Staff in the City Clerk's office, who are commissioners for taking affidavits, are authorized to swear the supporting affidavit.
- V. In a municipal election year, starting on Nomination Day and ending on Voting Day, no requests for an inquiry shall be submitted and the Integrity Commissioner shall not report to the City about whether or not a Member of Council contravened the *Municipal Conflict of Interest Act*.

*The personal information on this application form is collected under the authority of section 223 of the Municipal Act, 2001. The information will be used to ensure compliance with the Municipal Conflict of Interest Act, and will be shared with the City of Markham's Integrity Commissioner. Questions about the collection can be directed to the Public Services & Records Coordinator, City of Markham, 101 Town Centre Boulevard, Markham, Ontario, L3R 9W3 or by telephone at 905-477-5530.



The Corporation of the City of Markham

Application for an Investigation Under
Municipal Conflict of Interest Act

Affidavit of Applicant

I _____ of the _____ of _____,
[Applicant's Full Legal Name] [City, Town, etc.] [Name of municipality]

in the Province of Ontario, make oath and say [or affirm]:

[] [] I am an elector as defined by section 17 of the Municipal Elections Act, 1996.
Yes No

If no, I believe that I am acting in the public interest because: (explain how)

Three horizontal lines for explaining public interest.

I have reasonable grounds to believe that [name of Councillor] _____ a Councillor
for the City of Markham, has contravened the following sections of the Municipal Conflict of
Interest Act. Select all that apply.

- [] 5. The Member participated in the discussion and/or voted about a matter in which the
member has a direct or indirect pecuniary interest.
[] 5.1 The Member failed to file a written statement of a declared interest.
[] 5.2 The Member used their office to attempt to influence a decision or recommendation of
an officer or employee of the City and/or board about a matter in which the Member
has a direct or indirect pecuniary interest.

I became aware of the alleged contravention described on this application on _____ [date].
The particulars of this belief are outlined in the attached Schedule A [please outline the reasons for
your belief on the page labelled "Schedule A" and attach any supporting documents to Schedule A].

This affidavit is made for the purpose of requesting that this matter be reviewed and for no other
purpose.

Sworn [or affirmed] before me at)
the [City, Town, etc.] _____)
of [Name of municipality])
_____)
in the Province of Ontario on)
[date] _____)
_____)
[Signature of Commissioner])
A Commissioner for taking affidavits, etc.)

[Applicant's Signature]

Please see attached Schedule A.



The Corporation of the City of Markham

Schedule "A"

[Applicant's Full Legal Name]

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Please outline the reasons for your belief. Use additional copies of this page as necessary, providing clear and specific information. If you refer to any documents please attach copies of these documents to this Schedule.