



10511 – 103 Street
 High Level, AB
 T0H 1Z0
Ph: 780-926-2201
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General Inquiry

Form

| Office Use Only | | |
|-----------------------|------------|---|
| Work Required | | |
| | | |
| Referred to | Department | Date and Time |
| | | |
| Work Done | | |
| | | |
| Work done by | Date | Response to resident |
| | | <input type="checkbox"/> By Phone <input type="checkbox"/> By Email <input type="checkbox"/> In Person <input type="checkbox"/> N/A |
| Signature of employee | | Date |
| | | |

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