ACCESS/CORRECTION REQUEST

Municipal Freedom of Information and Protection of Privacy Act



CONTACT: Clerk - F.O.I. Coordinator 2 Fifth Street, P.O. Box 1000

Balmertown, Ontario P0V 1C0

Telephone: (807) 735-2096, Ext. 232 Fax: (807) 735-2286

A \$5.00 Application Fee must accompany each request whether for general records or for personal information.

| | | _ | |
|--|------------------------|---|----|
| Request for: | | Name of Institution request made to: | |
| Access to General Records | | | |
| Access to Own Personal Information | | The Corporation of the Municipality of Red Lake | |
| Correction of Own Personal I | nformation | | |
| If request is for access to, or correction of own personal information records: | | | |
| Last name appearing on records: Same as below or | | | |
| | | | |
| Details | | | |
| Last name: | First Name | Middle Name Mr Mr | rs |
| | | Ms Mis | SS |
| | l | | |
| Address (Street/Apt. No/P.O. Box No./R.R. No.) City or Town | | | |
| Province | | | |
| | | | |
| | | l | |
| Postal Code | Telephone Number (Day) | Telephone Number (Evening) | |
| | | | |
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| Detailed description of requested records or personal information to be corrected. (If you are requesting access to or correction of | | | |
| your personal information, please identify the personal information bank or record containing the personal information, if known.) | | | |
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| Note: If you are requesting a correction of personal information, please indicate the desired correction, and if appropriate, attach any supporting | | | |
| documentation. | | | |
| You will be notified if the correction is not made and you may require that a statement of disagreement be attached to your personal information. Preferred method of access to records: Signature: Date: | | | |
| Examine Original Receive Copy | | | |
| For Institution Use Only | | | |
| Date Received: | Request Number: | Comments: | |
| | | | |
| | | <u></u> | _ |
| Personal Information contained on this form is collected pursuant to the <i>Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information and Protection of Privacy Act</i> and will be used for the purpose of responding to your request. Questions about this collection should | | | |
| be directed to the Office of the Clerk, Municipality of Red Lake, 2 Fifth Street, P.O. Box 1000, Balmertown, Ontario. Telephone: (807) 735-2096, Ext. 232. | | | |