

Request Form

 $\ under \ the \ \textit{Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information and Protection of Privacy Act}$

Please Note: A \$5.00 application fee is required for all requests. Cheques may be made payable to the Brockville Police Service / City of Brockville

Request for:	Request made to:
☐ Access to General Records	Brockville Police Service
☐ Access to Own Personal Information	2269 Parkedale Avenue
☐ Correction to Own Personal Information	Brockville, ON, K6V 3G9
If request is for access to , or correction of , own personal information records:	
Last name appearing on records: same as below, or:	
☐ Mr. ☐ Mrs. ☐ Ms. ☐ Miss	Last Name:
First Name:	Middle Name:
Address: (Street/Apt. No./P.O. Box/R.R. No.)	City/Town:
Province:	Postal Code:
Telephone Number (Day): ()	Telephone Number (Evening): ()
Detailed description of requested records, personal information 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 person information, if known. Attach an additional page if necessary.) 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.	
Signature:	Date:
For Brockville Police Service Use Only	
Date Received: Comments:	
Comments.	

Personal Information contained on this form is collected pursuant to the Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Staff Sergeant of Operations of the Brockville Police Service.