

Type of Request:

- Access to General Records
 Access to Own Personal Information
 Correction to Own Personal Information

If request is for access to, or correction of, own personal information records, indicate if the last name appearing on the records is: Same as below, or: _____

Contact Information:

Last Name: _____ Given Name(s): _____

Address: _____ City/Town: _____

Province: _____ Postal Code: _____

Preferred Phone #: _____ Alternate Phone#: _____

Email Address: _____

Details of Request:

Please provide a detailed description of the requested records, personal information, or personal information to be corrected.

- Records request: include property address(es) (if applicable) and the names of any staff or position or departments/divisions that may be involved with the records and/or actions related to the subject of the request.
- Personal information: 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.

NOTE: the more detailed and specific you make your request, the more efficiently staff will be able to respond.

What are the dates of the information you are requesting, if applicable (yyyy-mm-dd)?

From: _____ To: _____

Preferred Method of Access to Records:

- Receive paper copy (\$.20/page) Examine original
 Alternate format. Please describe the format required:

Source of Request:

- Individual / Public
 Business
 Individual (by Agent)
 Academic / Researcher

Submission Requirements:

Please ensure this form is completed in full.

Requests can be submitted by mail or in person. The \$5.00 access fee must accompany the form. Payment may be made by cash, cheque or debit. Proof of identification is required when accessing your own personal information. The identification provided must bear your name, photo and signature. If applying by mail for access to personal information, please include a copy of your identification.

Cheques should be made payable to the Town of Hanover. Submit the application to:

Clerk
Town of Hanover
341 10th Street
Hanover, ON N4N 1P5

Notice of Collection:

Personal information contained on this form is collected under the authority of the *Municipal Freedom of Information and Protection of Privacy Act* and will be used to process and administrate your request.

Questions about this collection should be directed to the Clerks Division at 519-364-2780 or civic@hanover.ca.

Signature of Applicant

Date

Office Use Only

Date Received: _____ Request #: _____

Comments: _____