



Ontario

Access/Correction Request

Freedom of Information and Protection of Privacy

Request for:

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

Name of Institution request made to:

CITY OF GUELPH
1 CARDEN STREET,
GUELPH, ON. N1H 3A1

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. Mrs.
- Ms. Miss

Address (Street/Apt. No./P.O. Box No./R.R. No.)

City or Town

Province

Postal Code

Telephone Number (s)

Area Code

Evening

Area Code

Detailed description of requested records, personal information records or personal information to be corrected. (If you are requesting access to, or correction of, your personal information, please include your date of birth and identify the personal information bank or record containing the personal information, if known)

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

- Examine Original
- Receive Copy

Signature

Date

Day

Month

Year

EACH SEPARATE REQUEST MUST BE ACCOMPANIED BY THE \$5.00 APPLICATION FEE. CHEQUE OR MONEY ORDERS SHOULD BE

MADE PAYABLE TO THE CITY OF GUELPH.

Personal information contained on this form is collected pursuant to Freedom of Information and Protection of Privacy legislation and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Freedom of Information and Privacy Coordinator at the institution where the request is made.

