



# TOWN OF PETROLIA Access to Records Request Form

## Municipal Freedom of Information and Protection Privacy Act (MFIPPA)

**Please note:**

- Application fee \$5.00 must accompany all requests, please make cheque payable to the Town of Petrolia;
- Application is processed in accordance with the fees and timelines established through MFIPPA. The timelines begin from the date the request and application fee are received by the Clerks Office;
- Additional fees may be applicable (see reverse)
- In responding to request originals are not provided. On Site viewing of originals may be arranged.

<p><b>Request for:</b></p> <input type="checkbox"/> Access to General Records <input type="checkbox"/> Access to Own Personal Information <input type="checkbox"/> Correction to Own Personal Information	<p><b>Request to be directed to:</b></p> Clerks Department Town of Petrolia 411 Greenfield Street    Petrolia, ON    N0N 1R0
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If request is for **access to**, or **correction of**, own personal information

Last name appearing on records:  same as below, or: \_\_\_\_\_

Requestor Contact Information			
<input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	First Name	Last Name	
Street No.	Street Name	Suite/Unit No.	
City/Town	Province	Postal Code	
Telephone No.	Alternate No.	E-mail	
Signature		Date (yyyy-mm-dd)	

**Detailed description** of requested records, personal information or personal information to be corrected, including time frame, types of records, department that would provide information, etc.

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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.

<b>Preferred method of access to records:</b> <input type="checkbox"/> Examine Original <input type="checkbox"/> Receive Copy	<b>Signature of requestor:</b>	<b>Date:</b>
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For Municipal Use Only		
Date Received:	Request Number:	Final Response date:

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 Freedom of Information and Privacy Co-ordinator at the institution where the request is made.