



Freedom of Information and Protection of Privacy

REQUEST FOR ACCESS TO RECORDS

Name (First, Last)

Address (Number, Street, City, Postal)

Contact Phone Number

E-mail Address

Details of Requested Information

Please describe the records you are requesting. Please be as specific as possible. If the space below is not sufficient, attach a separate sheet.

Are you requesting access to another person's personal information?

Yes

No

Don't Know

If you are requesting personal information, please attach:

- a) That person's signed consent for disclosure, or
- b) Proof of authority to act on that person's behalf

Records Access Preference:

Examine Original

Receive Copy

E-mail

Mail

Pick-Up

Signature

Date Signed

Submit Your Request: To submit your request, please e-mail the form to Jennifer Borland, Records Management and Privacy Coordinator at FOIPrivacy@cnv.org. You can also mail or hand deliver the request form to City Hall (141 West 14th Street, North Vancouver, BC, V7M 1H9), or you can fax the request to 604-990-4202.

Personal information contained in this form is collected under the *Freedom of Information and Protection of Privacy Act* and will only be used for the purposes of responding to your request.