

Request Form

Please Note: A \$5.00 application fee is required for all requests.

Mail to: City Clerk
169 Front St
Belleville, Ontario K8N 2Y8

Request for: Access to General Records Access to Own Personal Information	Name of Institution request made to: City of Belleville
I will need the documentation requested to be provided in an alternate format. Please describe the format required (e.g. larger type, etc.)	

If request is for **access to, or correction of**, own personal information records:

same as below, or:

Mr. Mrs. Ms. Miss	Address: (Street / Apt. No. / P.O. Box / R.R. No.)
First Name: _____	City/Town: _____
Middle Name: _____	Province: _____
Last Name: _____	Postal Code: _____
Telephone Number (Day): (____)	Email: _____
Telephone Number (Evening): (____)	

Detailed description of requested records. (If you are requesting access to or correction of your personal information, please identify the record containing the person 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.

Signature:	Date:
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For Institution Use Only

Date Received:	Request Number:	Comments:
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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 Registrar, Information and Privacy Commissioner/Ontario, 2 Bloor Street East, Suite 1400, Toronto, Ontario M4W 1A8. Telephone (416) 326-3333 or toll free 1-800-387-0073 or the City Clerk 613-968-6481