

## 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

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Telephone Number (Day): (\_\_\_\_) \_\_\_\_\_

Telephone Number (Evening): (\_\_\_\_) \_\_\_\_\_

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

\_\_\_\_\_

City/Town: \_\_\_\_\_

Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_

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: \_\_\_\_\_

### ***For Institution Use Only***

Date Received: \_\_\_\_\_

Request Number: \_\_\_\_\_

Comments: \_\_\_\_\_