



**REQUEST FOR ACCESS TO PERSONAL INFORMATION
FOR THE PURPOSES OF: (a) LAW ENFORCEMENT and/or
(b) COMPLIANCE WITH A FEDERAL OR PROVINCIAL ACT
MUNICIPAL FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT,
R.S.O. 1990, ch. M.56 (as amended)**

This information is requested and disclosed in accordance with the provisions of section 29(1)(b) and sections 32(e), (f) and/or (g) of the *Municipal Freedom of Information and Protection of Privacy Act*, which permit collection/disclosure of personal information for the purpose of complying with a federal or provincial act, or where disclosure is by a law enforcement institution to another law enforcement agency/institution in Canada.

The front of this form is to be completed by the agency requesting information and will be used to assess the request.

1. Agency requesting information: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

2. Name of person to whom information requested pertains:

Name: _____ Date of Birth: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

3. Description of information requested: _____

4. Type of access requested:

Verbal
View original

Copy
Summary

Photo line-up file
Photographs

Note: Originals will be released pursuant to warrant, subpoena or summons only.

5. a) Information is requested for the following law enforcement investigation/proceeding:

Police
Federal Offence
Other (Please specify) _____

By-Law
Provincial Offence

Agency Incident or File No. _____

b) (i) Details of the nature of the investigation/proceeding: _____

(ii) Specify any applicable legislation, including section numbers, and attach a copy: _____

6. **Complete if applicable:** Disclosure of this information is required in compliance with (*insert name of provincial or federal Act, including section numbers, and attach a copy*)

7. Name of person requesting access: (*please print*)

Name: _____ Title: _____

I certify that:

(a) the information provided above is accurate and correct to the best of my knowledge, and

(b) I have the authority to collect the information requested on behalf of the agency noted for the purpose(s) specified.

Signature of Person Seeking Access: _____ Identification No. _____

Date: _____ Contact Phone No.: _____

FOR OFFICE USE ONLY:

Description of information provided:

- Same as 3. above.
- or -
 List Documents:

Nature of access provided:

- Verbal disclosure
 Original viewed
 Summary provided
 Photocopies taken
 Photographs

The information was released in accordance with the following provision(s) of section 32 of the *Municipal Freedom of Information and Protection of Privacy Act*:

- [] Section 32(e) - Disclosure was for the purpose of the Police Service complying with an Act of the Provincial Legislature or an Act of the Federal Parliament, or an agreement or arrangement under such an Act or Treaty.
- [] Section 32(f) - Disclosure was by the Police Service (a law enforcement institution) to another law enforcement agency in Canada.
- [] Section 32(g) - Disclosure was to an institution or law enforcement agency in Canada to aid an investigation undertaken with a view to a law enforcement proceeding or from which a law enforcement proceeding was likely to result.

Access Approved By:

Signature of Employee

Title: _____ Date: _____

Note: Where access is sought to information relating to a Municipal/Police Service Employee, the Inspector of Administration must approve access.

Should you have any questions regarding the use of this form, please contact the Records Manager, Brantford Police Service, P.O. Box 1116, 344 Elgin Street, Brantford ON N3T 5T3. 519-756-0113