Access/Correction Request
Municipal Freedom of Information and Protection of Privacy

☐ Access to General Records
☐ Access to Own Personal Information
☐ Correction of Own Personal Information

Institution request made to: Gananoque Police Service
340 Herbert Street,
Gananoque ON K7G 1R1

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

Last name appearing on records: ☐ same as below **OR**

DETAILS:

Last Name	First Name	Middle Name	Date of Birth Day	Month	Year

Address (Street/Apt. No./P.O. Box No./R.R. No.)	City or Town	Province

Postal Code	Telephone Number(s)	Area Code	Area Code
	Day		Evening

Detailed description of requested records, personal information records or personal information to be corrected. (If you are requesting access to, or correction of, your personal information, please identify the personal information bank or record containing the personal information, if known)

PLEASE NOTE:
- A $5.00 application fee along with 2 pieces of identification is required for all requests. Additional processing fees may apply.
- This Access/Correction request will be processed in accordance with the time lines set out in the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and Regulations. The time line to respond to your inquiry begins with the receipt of the application fee.

The record(s) you requested may contain the personal information of individuals other than yourself.

Do you wish these individuals be contacted to try and obtain their consent to disclose their information? ☐ Yes ☐ No

If yes, do you consent to our releasing YOUR identity to the individuals we contact? ☐ Yes ☐ No
(You are not required to release your identity under MFIPPA)

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.

Preferred method of access to records	Signature	Date (Day-Month-Year)
☐ Examine Original (On site only) ☐ Receive Copy		

For Institution Use Only

Date received (Day-Month-Year)	Request Number	Identification Verified		Fee Received
		1.	2.	$

Personal information contained on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy legislation and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Municipal Freedom of Information and Privacy Coordinator at Gananoque Police Service, 340 Herbert Street, Gananoque, ON Canada K7G 1R1. Phone: (613) 382-4509 ext. 2225