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|---|------------------------------------|
| Request for:<br>Access to General Records      Access to Own Personal Information<br>Correction to Own Personal Information   |                                    |
| If request is for access to or correction of own personal information records:<br>Last name appearing on records:<br>Same as below OR:  |                                    |
| <b>Details</b>  |                                    |
| Last Name:  | First Name:                        |
| Middle Name:  | Mr.    Mrs.    Ms.    Miss         |
| Address:  | Town:                              |
| Province:   | Postal Code:                       |
| Phone:  | Cell:                              |
| Detailed description of requested records, personal information 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.     |                                    |
|   |                                    |
| Note: If you are requesting a correction of personal information, please indicate the desired correction and attach any supporting documentation. You will be notified if the correction is not made and you require that a statement of disagreement be attached to your personal information. |                                    |
| Preferred method of access to records:  | Examine Original      Receive Copy |
| Signature:  | Date:                              |
| <b>For Township Use Only</b>  |                                    |
| Date Received:  | Request No.:                       |
| Comments:   |                                    |
| \$5.00 Application Fee Received :   |                                    |