

SURREY POLICE BOARD

REQUEST FOR ACCESS TO RECORDS UNDER THE FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

IMPORTANT INFORMATION – PLEASE READ FIRST

- 1. This form MUST be completed in FULL.
- 2. If you are requesting information about yourself, we may require a copy of your government issued identification such a Driver's License.
- 3. Under the Freedom of Information and Protection of Privacy Act, we have thirty (30) business days, excluding weekends and holidays, to respond to your request. We process requests in the order that they are received.

YOUR NAME					
Miss□	Ms.□]	Mrs.□		
Mr.□	Other				
LAST NAME:	Other	FIRST NAME:		MIDDLE NAME:	
001101111111111111111111111111111111111					
COMPANY NAME (IF APPLICABLE):					
HAVE YOU EVER GONE BY ANOTHER NAME, IF SO, WHAT WAS THAT NAME?					
YOUR ADDRESS					
STREET, APARTMENT NO. P.O.	CITY/1	TOWN:	PROVINCE/COUNTRY		POSTAL CODE:
BOX					
YOUR TELEPHONE NUMBER(S)					
DAY PHONE NO			ALTERNATE NO.		
DETAILS OF REQUESTED INFORMATION					
PLEASE DESCRIBE THE RECORDS YOU ARE REQUESTING. BE SPECIFIC AS POSSIBLE TO ASSIST WITH THE REQUEST PROCESS. ATTACH A SEPARATE SHEET IF THE SPACE BELOW IS NOT SUFFICIENT.					
ARE YOU REQUESTING ACCESS TO ANOTHER PERSON'S INFORMATION?					
YES NO					
IF YES, PLEASE ATTACH: (a) THAT PERSON'S SIGNED CONSENT FOR DISCLOSURE WITH A COPY OF GOVERNMENT ISSUED PHOTO ID OR					
(b) PROOF OF AUTHORITY TO ACT ON THAT PERSON'S BEHALF (E.G. POWER OF ATTORNEY)					
YOUR SIGNATURE: DATE SIGNED:					

Personal information is collected for the purpose of responding to your request. Surrey Police Board is collecting this under s. 26(c) of the Freedom of Information and Protection of Privacy Act. For questions regarding the collection of personal information on this form please contact the Privacy Officer, FOI@surreypoliceboard.ca or 604-591-4460, fax 604-501-7578.