

Personal information on this form is collected under Alberta's *Freedom of Information and Protection of Privacy Act* and will be used to respond to your request. See instructions for completing this form.

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About you	Title (optional)	Last Name	First Name		
	Name of Company or Organization <i>(if applicable)</i>				
	Mailing Address	Street	City/Town/Village	Province	Postal Code
	Telephone Number () E-mail Address	r (daytime)	Telephone Number <i>(evening)</i>	Fax Number	
About your request About the information you want to access	<ul> <li>1. What kind of information do you want to access?</li> <li>General information (<i>An initial fee of \$25 is required – see instructions for explanation of fees.</i>)</li> <li>Your own personal information (<i>No initial fee is required for personal information.</i>)</li> <li>2. To which public body are you making your request?</li> </ul>				
	Town of Blackfalds				
	<ul> <li>3. Do you want to: receive a copy of the record? OR examine the record?</li> <li>1. What records do you want to access? Please give as much detail as possible. (If you want access to your own personal information, be sure to give all your previous names. For another person's information,</li> </ul>				
	you must attac	h proof that you ca	n legally act for that person.)		
	2. What is the time period of the records? Please give specific dates. (See instructions for details.)				
Your signature	Signature			Date	
Where to send your request	Send your completed request form, and initial fee if applicable, to the Records Management & FOIP Coordinator, Town o Blackfalds, Box 220, 5018 Waghorn Street, Blackfalds, AB, T0M 0J0 or send an electronic copy to <u>foip@blackfalds.com</u> .				
	FOR FOIP OFFICE USE ONLY				
	Date Received		Request Number		
			Comments		
			FOIP GL Code 1-12-06-590		

# **Request to Access Information**

## Instructions

You can access many public body records without making a request under the *Freedom of Information and Protection of Privacy Act* (the *FOIP Act*). To determine whether you need to make a request under the Act or if you need help completing the form, contact the FOIP Coordinator of the public body to which you are making the request.

## About you

In this part of the form enter:

- your last name, first name and preferred title, if any;
- the name of the company or organization you are representing, if applicable;
- your complete mailing address and daytime and evening telephone numbers so that the public body can contact you about the request;
- a fax number or e-mail address, if any, where correspondence may be sent.

## About your request

If you need help to find out what records a public body has, contact the FOIP Coordinator for the public body.

1. What kind of information do you want to access? Check general or personal information.

**General information** is information other than personal information (see below). For example, it would include information about a third party.

Do not include your credit card information in the mail or fax.

- There is an initial fee of \$25.00.
  - For a request to a government department, make the cheque payable to the Government of Alberta.
  - For a request to a public body that is **not** a government department, please consult with the FOIP Coordinator for payment information.
- The public body provides you with an estimated cost before processing begins.
- If the total cost of processing your request is more than \$150, you are asked to pay a 50% deposit.
- The records are provided when the fee is paid in full.

**Personal information** is your own personal information or the personal information of an individual you are entitled to represent.

- You must provide proof of your identity before records containing your personal information are released to you.
- If you are requesting records for another person, you must provide proof that you have authority to act for that person (e.g. guardianship or trusteeship order, power of attorney).
- There is no initial fee for accessing your own personal information.
- If the cost of photocopying is more than \$10, you will be notified of the fee.

**Continuing request:** This is a single request that is processed more than once at predetermined time intervals over a period of up to 2 years. Contact the FOIP Coordinator of the public body if you are making a continuing request.

- The initial fee is \$50.00.
- You must pay any additional costs as the information becomes available.
- 2. To which public body are you making your request? Enter the name of the public body that you believe has the records that you are requesting.
- 3. Do you want to receive a copy of the record OR examine the record? Check the appropriate box indicating whether you want to receive a copy of the record *or* examine the record.

## About the information you want to access

#### 1. What records do you want to access?

- Be as specific as possible in describing the records.
- If you need more space, continue your description on a separate sheet of paper and attach it to this request form.

#### If requesting your own personal information, give:

- your full name;
- any other names that you have previously used; and
- any identifying number that relates to the records, such as your employee number, case number or other identification number.

#### If requesting another person's information, give:

- the person's full name;
- any other name that person may have used on the records; and
- any identifying numbers for the person, if you know them.

If you are requesting records for another person, you will have to provide proof that you have authority to act for that person.

2. What is the time period of the records? Enter the specific dates or date ranges of the records you want to access. (e.g. if you want records for the period January 1, 2005 to August 31, 2007, enter those dates. If you want records from August 2008 to present, enter "August 2008 to present.")

#### Your signature

Sign and date the form.

#### Where to send your request

Send your completed form, and initial fee if applicable, to:

Records Management & FOIP Coordinator Town of Blackfalds Box 220 | 5018 Waghorn Street Blackfalds, AB Phone 403.885.6370 | Fax 403.885.4610 foip@blackfalds.com