

# Access / Correction Request



## Freedom of Information

Please note: A \$5.00 application fee payable to the Town of Orangeville is required for all requests.

**Request for: \***

- Access to General Records
- Access to Own Personal Information
- Correction to Own Personal Information

Name of Institution request made to:

Clerk, Town of Orangeville

87 Broadway

Orangeville, ON L9W 1K1

Telephone: (519) 941-0440 Ext. 2242

E-mail: [klandry@orangeville.ca](mailto:klandry@orangeville.ca)

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

**Last name appearing on records: \***

**Last name if different from records:**

**First Name: \***

**Middle Name(s):**

**Street Number and Street Name (and Unit Number if applicable): \***

**Town or City \***

**Province: \***

**Postal Code \***

**Home Phone Number: \***

**Cell Number:**

**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 info bank or record containing personal info, if known**

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.

**Supporting Documentation:**

**Preferred method of access to records: \***

Examine Original

Receive Copy

**Signature:**

**Date:**

Personal information contained on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy Act and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Clerk, Town of Orangeville.

# Payment

A \$5 fee is required for this request.