

Name of Institution request made to:

Access/Correction Request Form

Corporation of the City of Kingston

Municipal Freedom of Information and Protection of Privacy Act

Request for:

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

Submit to:

City Clerk
 Kingston City Hall
 216 Ontario Street
 Kingston, ON K7L 2Z3

INCLUDE \$5.00 APPLICATION FEE.

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: _____

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

Postal Code	Telephone Number (s) Day <input type="checkbox"/>	Area Code	Area Code	Evening <input type="checkbox"/>
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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 include your date of birth.

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 <input type="checkbox"/> Examine Original <input type="checkbox"/> Receive Copy	Signature _____	Date <input type="checkbox"/>	Day _____	Month _____	Year _____
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EACH SEPARATE REQUEST MUST BE ACCOMPANIED BY THE \$5.00 APPLICATION FEE. CHEQUES AND MONEY ORDERS SHOULD BE MADE PAYABLE TO THE CITY OF KINGSTON.

Please note, additional processing fees may apply.

Personal information contained on this form is collected pursuant to 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 City Clerk at (613) 546-4291, ext. 1247