Name of Institution Request Made to:

The Corporation of the Town of Innisfil

Access/Correction Request Freedom of Information and Protection of Privacy

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Request for:					Submit Request to:				
Access to General Records					Town Clerk				
Access to Own Personal Information					Town of Innisfil Administration Offices 2101 Innisfil Beach Road, Innisfil, ON L9S 1A1				
Correction of Own	Personal Info	rmation	1		Zivi minisiii Deach Noau, innisiii, UN 133 IAT				
					INCLUDE \$5.00 APPLICATION FEE – Request cannot be				
					processed unti	il fee is paid	in full		
If request is for access to, or correction of, own personal information records:									
Last name appearing on records: 📮 same as below, Or:									
REQUESTER'S INFORMATION:									
Last Name: First Name							Middle Name	:	
Address (Street/Apt. No./P.O. Bo	x No./R.R. No.)			City or Town			Province		
Postal Code	Telephone	Area Code	e			Telephone	Area Code	1	
	No.					No.			
Personal Email	Day		Work Empil			Evening	Evening		
					Work Email				
Detailed description of requested records, personal information records or personal									
information to be corrected. (If you are requesting access to, or correction of, your									
							•	y the personal	
								· ·	
information bank or record containing the personal information, if known). Note: If 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 record	rds Signature				Da	ay Mont	h Year		
Examine Original								(Internal Use Only)	
Receive Copy									
EACH SEPARATE RE	QUEST MUST	Г ВЕ АС	COMPAN	IIED B	Y THE \$5.00 AP	PLICATION	FEE.		
Personal information con	tained on this	form is co	ollected n	ireuant	to the Municipal I	Freedom of In	formation ar	d Protection of Privacy	
Personal information contained on this form is collected pursuant to the Municipal Freedom of Information and Protection of Privacy legislation and will be used for the purpose of responding to your request. Questions about this collection should be directed to the									
Freedom of Information and Privacy Coordinator at the institution where the request is made.									

Access/Correction Request

Freedom of Information and Protection of Privacy

Additional Fees

Section 45 of the Municipal Freedom of Information and Protection of Privacy Act

- Search Time \$7.50 per 1/4 hour
- Preparation Time \$7.50 per 1/4 hour
- Computer programming \$15.00 per 1/4 hour
- Photocopying and Computer Print-outs \$0.20 per page
- CD \$10.00 per Disk
- Reproduction of Large Drawings \$20.00 per sheet
- Any shipping costs
- Any additional fees incurred in responding to a request

For further information regarding the collection or disclosure of information at the Town of Innisfil, please contact:

Records Coordinator or Town Clerk

Town of Innisfil 2101 Innisfil Beach Road, Innisfil, ON L9S 1A1 Telephone: 705-436-3710 Fax: 705-436-7120