



Freedom of Information and Protection of Privacy

Request for Access to Records

APPLICANT INFORMATION:	
Full Name (first and last):	Company Name (if applicable):
Street / Apt No. / PO Box / RR No.:	City / Town: Province: Postal Code:
Email Address:	Day Phone or Cellular No.:
Information Requested (The <i>Freedom of Information and Privacy Act</i> can only be used to request copies of recorded information, not to pose questions to be responded to. Please describe the records you are requesting. Be as specific as possible, including date and timeframe for your records if applicable, as this will assist the Request process. Please specify any Reference No. or File No. if known. Attach a separate sheet, if the space below is not sufficient.)	
Are you requesting access to another person's personal information? Yes No If yes, please attach, as appropriate: (a) That person's signed consent for disclosure OR (b) Proof of authority to act on that person's behalf	
Requested information to be: (Choose one of the three options below): 1. Original examined at the SLRD Office 2. Mailed by regular or registered post to address provided (at your cost) 3. Sent by secure electronic transfer to your email address provided	YOUR SIGNATURE: DATE SIGNED: (DD/MM/YY)
FOR PUBLIC BODY USE ONLY:	
Request #:	Date Received:

You may make a request for access to records without using this form, provided you do so in writing.

Personal information contained on this form is collected under section 26(c) of the *Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of responding to your request.

Pursuant to the Act and to Bylaw No. 673, 1993 there may be fees associated with this request. We will provide you with a fee estimate, if applicable, within 20 business days of receiving your request.

Submit your application to the FOI head via email info@slrd.bc.ca, mail to Box 219, 1350 Aster St, Pemberton, BC V0N 2L0, or fax (604) 894 6526.