



Access / Correction Request

Freedom of Information and Protection of Privacy

NOTE: A \$5.00 Application Fee must accompany this request on submission.

CONTACT: Freedom of Information Coordinator
 Thunder Bay Police
 1200 Balmoral Street, Thunder Bay, ON. P7B 5Z5
 Telephone: (807) 684-1200 ext: 2422
 Fax: (807) 345-1028

Request for: <input type="checkbox"/> Access to General Records <input type="checkbox"/> Access to Own Personal Information <input type="checkbox"/> Correction of Own Personal Information		Name of Institution request made to: <h3 style="text-align: center;">Thunder Bay Police Services</h3>	
Last name appearing on records <input type="checkbox"/> Same as below or ➤			
Last Name		First Name	Middle Name
<input type="checkbox"/> Male <input type="checkbox"/> Female		Date of Birth	
Address (street/Apt.No./P.O. Box/R.R. No.#)		City/Town	Province
Postal Code	Telephone Number(s)	Area code	Area Code
	Day		Evening
Detailed description of requested records, personal information records or personal information to be corrected, including any dates, times or incident numbers and/or location of incident and type of incident.			
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 Day Month Year
For Institutional Use Only			
Date Received	Receipt Number	Comments	
Personal information contained on this form is collected pursuant to 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 this request is made.			