DURHAM REGIONAL POLICE SERVICE



Access Request

Municipal Freedom Of Information And Protection Of Privacy Act

Note: All access requests must be accompanied by a \$5.00 application fee					
NOTE: The record(s) you have requested may contain personal information of individuals other than yourself (for example, accused, victim, witnesses). Such personal information can only be released with the consent of those individuals.					
1. Do you wish us to contact these individuals to ask for consent to release their personal information?					
☐ Yes ☐ No					
2. If your answer is Yes to question 1. above, do you consent to our releasing your identity to the individuals we contact?					
☐ Yes ☐	No				
Requester's informa	tion: (<u>All</u> fields m	ust be completed)			
Name:				Sex: Male Female	
	surname	first name	middle name	_	
Date of birth:Y		_ home phone #:	W	/ork #:	
Y	YYY-MM-DD		_		
Address:			O: /T		B + 10 1
	Street		City/Town	Provinc	e Postal Code
Email address:					
How was your name recorded at the time the record was created?					
Same as above As follows:					
Carefully explain what record(s) you are requesting. Provide the following details: date, type of incident, location, incident number, names of individuals involved					
You will receive an email from EVIDENCE.COM when your request has been processed					
Signature of requester: Date:					
orginatore or request	O			Date.	YYYY-MM-DD
Request and fee rec	eived by::		Reg	. #:	Divison:
Receipt #:				I.D. v	riewed and verified:
Personal information collected on this form is done so pursuant to s.80 Community Safety and Policing Act, 2019, S.O. 2019, c. 1, Sched. 1 and Municipal					

Personal information collected on this form is done so pursuant to s.80 Community Safety and Policing Act, 2019, S.O. 2019, c. 1, Sched. 1 and Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56, and will be used for the purpose of responding to your request. For further information, you can contact the applicable unit. Questions about this collection should be directed to Freedom of Information, Durham Regional Police Service, 605 Rossland Rd. East P.O. Box 911 Whitby ON L1N 0B8, PrivacyUnit@drps.ca