



ABBOTSFORD POLICE DEPARTMENT

Request for access to records under the FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY ACT

IMPORTANT INFORMATION – PLEASE READ FIRST

1. This form **MUST** be completed in full. Completed forms can be dropped off in person or emailed to askfoi@abbypd.ca
2. **If you are requesting information about yourself, we require a copy of your government-issued ID (e.g. Driver's License). No information will be sent to you until we receive a copy of your identification.**
3. We do NOT fax copies of police reports. You may make arrangements to pick up the report, or we will send it to you via Canada Post or a specified email address.
4. Under the *Freedom of Information and Protection of Privacy Act*, we have (30) days (excluding weekends and holidays) to respond to requests for information. We process requests in the order that they are received.
5. Personal Information contained on this form is collected under the *Freedom of Information and Protection of Privacy Act* and will be used only for the purpose of responding to your request.

YOUR NAME

LAST NAME	FIRST NAME	MIDDLE NAME
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HAVE YOU EVER GONE BY ANOTHER NAME? IF SO, WHAT?

YOUR ADDRESS

STREET, APT #, PO BOX, RR NO.	CITY/TOWN	PROVINCE / COUNTRY	POSTAL CODE
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YOUR TELEPHONE / FAX NUMBER(S)

DAY PHONE NO.	ALTERNATE PHONE NO.	EMAIL ADDRESS
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DETAILS OF REQUESTED INFORMATION

INFORMATION REQUESTED (PLEASE DESCRIBE THE RECORDS YOU ARE REQUESTING. BE AS SPECIFIC AS POSSIBLE, AS THIS WILL ASSIST THE REQUEST PROCESS. ATTACH A SEPARATE SHEET IF THE SPACE BELOW IS NOT SUFFICIENT)

IF YOU ARE REQUESTING PERSONAL INFORMATION ABOUT YOURSELF, PLEASE PROVIDE THE FOLLOWING INFORMATION:

DATE OF BIRTH	YEAR	MONTH	DAY	DRIVERS LICENSE NUMBER	PROVINCE
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If you are requesting access to another person's personal information, your request will be denied pursuant to section 22(1) of the *Freedom of Information and Protection of Privacy Act* unless you provide written consent/authorization and government-issued picture identification of the third party. Alternatively, a legal document that outlines your authority to act on behalf of the third party will also be accepted.

Does your request relate to an ongoing or potential <i>Police Act</i> complaint/investigation?	YES	NO
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YOUR SIGNATURE	DATE SIGNED	YEAR	MONTH	DAY
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