



Access/Correction Request

Municipal Clerks Office
 1 Toronto Street
 P.O. Box 357
 Colborne, ON K0K 1S0

Municipal Freedom of Information and Protection of Privacy Act

Application Fee \$5.00. An application fee of \$5.00 is to accompany all requests for information and/or correction requests. Please make cheque/money order payable to Township of Cramahe. Forward to the Clerk, 1 Toronto Street, P.O. Box 357, Colborne, ON K0K 1S0.

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	Township of Cramahe Identify Division:..... Unit Name/Location: Other Institution:..... (if applicable).....
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Last Name:..... First Name: Initial:.....
 Daytime Telephone No. (....)..... Evening Telephone No. (....)

Address: Suite No.
 City/Town: Province: Postal Code:

Detailed description of requested records, personal information records or personal information to be corrected.

** If you are requesting a correction of personal information, please indicate the desired correction and attach any supporting documentation.

Preferred method of access to records: Examine Original or Receive Copy
 *Fees: Please note processing costs (i.e., photocopying, postage) may apply.

Signature Of Applicant _____ Date _____
Day / Month / Year

OFFICE USE ONLY

Date Request Received	Date App. Fee Received	Date Due	Request No.
Day / Month / Year	Day / Month / Year	Day / Month / Year	

The personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act. The information will be used for the purpose of responding to your request.