

Last Name: _____ First Name: _____
Middle Name: _____ Mr. Mrs. Ms. Miss Other
Address: _____ City/Town: _____
Province/Country: _____ Postal Code: _____
Phone: _____ Fax Number: _____ Day phone #: _____
Alternate Phone #: _____ Email: _____

Details of Requested Information

Please describe the records you are requesting and be as specific as possible. You may attach a separate sheet if necessary.
Example "I would like a copy of the Fire Department incident report for the motor vehicle accident that occurred at 9 a.m. on January 24, 2013 at the intersection of Guildford Way and Pinetree Way"

Are you requesting access to another person's personal information? *If so, please attach, as appropriate:*

- A. That person's signed consent for disclosure; or
- B. Proof of authority to act on that person's behalf

Preferred method of access to records:

Examine original: Receive copy:

Your signature

Date signed (Year/month/day)

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

Please complete this form and submit it to the attention of:
Lauren Hewson – Information, Privacy and Administrative Services Manager
3000 Guilford Way, Coquitlam, BC, V3K 7N2
Phone: 604.927.3011
email: FOI@coquitlam.ca

Date Received

The personal information collected on this form is collected in accordance with the *Freedom of Information and Protection of Privacy Act (the 'Act')*. The City has authority to collect your information for the purposes of administering the FOI process in accordance with Section 5 of the Act. Should you have any questions or concerns about the collection of your personal information please contact Lauren Hewson by following the contact information listed above.