



Local Authority Freedom of Information and Protection of Privacy Access to Information Request Form

Please direct this request to **Jeff Court (email: jcourt@srsd119.ca)**

545 – 11th Street East

Prince Albert SK S6V 1B1

A copy of the Local Authority Freedom of Information and Protection of Privacy Act can be accessed
online: <http://www.qp.gov.sk.ca/documents/English/Statutes/Statutes/F22-01.pdf>

Applicant Information

| | | | |
|-------------|------------------|------------------|-----------------|
| Last Name | | First Name | |
| Address | | City or Town | Province |
| Postal Code | Telephone – Home | Telephone – Work | Telephone - Fax |

Details of Requested Information

| | | |
|--------------------------------|-----------------------------|------------------------------|
| Type of Request: | General Information Request | Personal Information Request |
| Name of Record (if known) | | |
| Detailed Description of Record | | |

I understand that an application fee of \$20 is to be submitted with this request unless, with respect to a request for personal information, the fee is waived under the terms of the Act.

I also understand that there may be a processing fee to process this request and that, prior to receiving access to the records I have requested, I am required to pay that fee unless it is waived.

Check this box if you are requesting to have the processing fee waived.

I request that payment of the processing fee related to this request be waived because payment will cause me substantial financial hardship. Please record the details on the back of this form.

Signature of Applicant: _____

| | | | |
|----------------------------|-------------------------|--|--|
| <i>For Office Use Only</i> | | | |
| Date Received: _____ | Expiry Date: _____ | | |
| Application Fee Received: | Yes No Waived | | |