

Request for Correction of Personal Information
Part XX - Freedom of Information and Protection of Privacy
*** Section 484(1)**
Municipal Government Act

TO: Access & Privacy Office
Halifax Regional Municipality, P.O. Box 1749, Halifax, NS B3J 3A5
or hand deliver to: Duke Tower, 5251 Duke St, 3rd Floor, Halifax, NS
Tel: (902) 943-2148 Email: accessandprivacy@halifax.ca

1. This is a request pursuant to Part XX of the Municipal Government Act (Freedom of Information and Protection of Privacy) for the correction of personal information.

2. The details of the personal information requested to be corrected are as follows:

- (a) last name appearing on personal information to be corrected _____
- (b) department or institution maintaining personal information _____
- (c) name of personal information bank or record _____
- (d) description of personal information to be corrected _____

3. The correction requested is as follows:

Date: _____

Signature of Applicant: _____

Print Full Name of Applicant: _____

Mailing Address of Applicant:

(Street/Apartment No./R.R. No.)

(Community)

(Postal Code)

Telephone Numbers of Applicant: (Res): _____ (Bus): _____

Fax Number of Applicant: _____

E-Mail Address of Applicant: _____

FOR OFFICE USE ONLY

Date Received _____ Application No. _____

Notes: _____



Collection & Use Disclosure Statement

In accordance with Section 485 of the Municipal Government Act, the personal information collected on this form will only be used and/or disclosed if necessary, for the purpose(s) of processing this Request for Correction to Personal Information. If you have any questions about the collection and use of this information, please contact HRM's Access & Privacy Office at (902) 943-2148 or accessandprivacy@halifax.ca.