

## **REQUEST FOR ACCESS TO RECORDS**

Personal information on this form is collected under British Columbia's *Freedom of Information and Protection of Privacy Act* and will be used to respond to your request.

About you			
First Name	Last Name		
Name of Company or Organization (if applicable)			
Address	City	Province	Postal Code
Telephone Number	Email Address		
Details of the records you are seeking access to  Please give as much detail as possible. If you are seeking access to your own personal information, please include identifiers to help us find your records. If you are seeking access to another individual's personal information, you must include proof of your authorization in order for us to release information to you.			
Date range of records search			
Please include a start and end date for the records you are seeking access to.			
Start Date E to	nd Date		
ιο			
Signature		Date	