



**Clarington Public Library**  
[www.clarington-library.on.ca](http://www.clarington-library.on.ca)

## REQUEST FOR ACCESS TO INFORMATION BY THE PUBLIC

Date (MM/DD/YYYY): \_\_\_\_\_

### Requestor Information

\_\_\_\_\_

First Name

\_\_\_\_\_

Middle Name

\_\_\_\_\_

Last Name

\_\_\_\_\_

Apt/Unit Number

\_\_\_\_\_

Building/House Number

\_\_\_\_\_

Street

\_\_\_\_\_

City/Town

\_\_\_\_\_

Province

\_\_\_\_\_

Postal Code

( )

\_\_\_\_\_

Telephone Number (Day)

\_\_\_\_\_

Telephone Number (Evening)

### Request for

Access to General Records

Access to Own Personal Information

Correction to Own Personal Information

**If request is for access to, or correction of, own personal information records, name is**

Same as above

Different. Please specify name:

**Preferred method of access to records**

Examine Original

Receive Copy

Please provide a detailed description of requested records, personal information or personal information to be corrected.

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**Note:**

*If you are requesting a correction of personal information, please indicate the desired correction, and if appropriate, attach any supporting documentation. You will be notified if the correction is not made and you may require that a statement of disagreement be attached to your personal information.*

\_\_\_\_\_  
Signature of Requestor

\_\_\_\_\_  
Date (MM/DD/YYYY)

**For Office Use only**

**Date Received  
(MM/DD/YYYY)**

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**Request  
Number**

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**Comments**

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