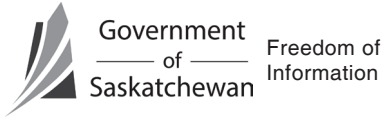


Form B [Section 20]



Request For Review Form

FREEDOM OF INFORMATION AND PROTECTION OF PRIVACY Form B [Section 20]

INFORMATION ABOUT YOU

Last Name First Name
Name of Company or Organization (if applicable - optional)
Address City Province Postal Code
Day Phone Number Alternate Number Fax Number Email

INFORMATION ABOUT THE RECORDS YOU REQUESTED

Did you request:

- your own personal information.
personal information about someone other than yourself (attach proof that you have authority to receive the information requested - see instructions).
general information.

To which government institution are you making your request?

[Blank input field]

What records do you wish to access? Please provide a detailed description of the records you wish to access.

[Blank input field]

FREEDOM OF INFORMATION AND  
PROTECTION OF PRIVACY

F-22.01 REG 1

**REASON FOR REQUEST**

- I have been refused access to all or part of the record.
- I have been notified that the record does not exist/cannot be found.
- I have been notified that the existence of the record shall neither be confirmed nor denied.
- I have not received a reply to my application, which I submitted \_\_\_\_\_ days ago.
- I disagree with the need to extend the 30-day response period.
- My correction to a personal information record was not accepted as correct/verifiable.
- I am a third party, and I wish to request a review of a decision to give access to a record that affects my interests.
- I disagree with my request being transferred.
- I disagree with the manner of providing access.
- I disagree with the fees estimated.
- I disagree with the decision not to grant my fee waiver.
- I disagree with the collection of my personal information.
- I disagree with the use of my personal information.
- I disagree with the disclosure of my personal information.

**FOR OFFICE USE ONLY**

Date Received

Application Number – OIPC Number