

**Village
of
Nakusp**

Request for Access to Records

Under the Freedom of Information and Protection of Privacy Act

91 – 1st Street NW
PO Box 280
Nakusp, BC V0G 1R0
Telephone: 250.265.3689
Fax: 250.265.3788
Email: info@nakusp.com

APPLICANT'S INFORMATION		
NAME:		
ADDRESS:		POSTAL CODE:
CITY:	PROVINCE	COUNTRY:
TELEPHONE:		FAX:
DETAILS OF REQUESTED INFORMATION		
Please be as specific as possible about the record(s) you are requesting – attach a separate sheet if necessary.)		
File/Reference Number (if known):		
Details:		
<p>How do you wish to receive the information? Please check one of the following:</p>		
Examine the original(s) <input type="checkbox"/>		Receive a hard copy <input type="checkbox"/>
Receive an electronic copy <input type="checkbox"/> Email address:		
<p>If this is a request to access another person's personal information, you must attach either a signed consent form for disclosure for the person(s) involved, OR proof of authority to act on that person's behalf.</p>		
Signature of Applicant		Date
<p><i>You may make a request for access to records without using this form, provided you do so in writing. Personal information contained on this form is collected under the Freedom of Information and Protection of Privacy Act and will be used only for the purpose of responding to your request.</i></p>		
For Office Use Only		
Date Received:	<input type="checkbox"/> Access to General Information	
Received By:	<input type="checkbox"/> Access to Personal Information	