*(Please Print)*  **Applicant Information**

|  |  |
| --- | --- |
| Last Name  | First Name |
| Address | City/Town | Province |
| Postal Code | Telephone (Residence) | Telephone (Work) | Facsimile |

**Details of Requested Information**

|  |
| --- |
| General Information Request □ Personal Information Request □  |
| **Weyburn Police Service** |
| Name of Record (*if known*) |
| Detailed Description of Record: |

A $20 application fee (cheque or money order payable to “Weyburn Police Service” preferred) must accompany all requests. The processing of this request will **not** begin until this fee is received.

I understand that there may be an additional processing fee to process this request and, prior to receiving access to the records I have requested, I am required to pay that fee, unless it is waived.

□ **Check if requesting waiver of processing fee:**

I request payment of the processing fee related to this request be waived, because payment will cause me substantial financial hardship. Details are as follows: (Use reverse of form if additional space is required.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Applicant

|  |
| --- |
| **For Office Use Only**Date Received \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Received by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Badge # \_\_\_\_\_\_\_\_\_\_\_\_\_Applicant Identity Confirmed Yes □ (Type \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ) No □Application Fee Received Yes □ No □ |

Personal information contained on this form is collected pursuant to *The Local Authority Freedom of Information and Protection of Privacy* Act and will be used for the purpose of responding to your request. Questions about this collection should be directed to the Access and Privacy Unit.