

# Access to Information Request Form

## Application

I am seeking access to:

- My own personal information.
- Other information.
- Both my own personal information and other information.

## Record Description

I am applying for access to:

- A video surveillance record
- Other (specify): \_\_\_\_\_

Record description:

*(Describe the record, including details such as the specific event or action to which it refers, the branch the event or actions took place at, the date of the record or the date period to which it relates, or names of library staff members who prepared or may have knowledge of the information.)*

Date: \_\_\_\_\_

Full Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Contact Information: \_\_\_\_\_

### **Fees**

Check any that apply:

I am making a request for my own personal information (no fees apply).

I am making a request for other information and agree to pay the \$5.00 fee.

### **Request to Waive Fees**

I hereby request to be excused from paying fees related to the above application because:

I cannot afford to pay fees.

Other reason (specify): \_\_\_\_\_

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### **For Office Use Only**

Date Received: \_\_\_\_\_