



# Application Freedom of Information Access Request

Use this form to: Request City information  
Request personal information or personal health information  
Correct personal information or personal health information

Description of Information Requested	
Reports, Correspondence, Briefing notes regarding	
LRT Development and Construction from	
January 1, 2015 - March 1, 2016	
Which City office or division has the information you are requesting, if you know it:	What are the dates of the information you are requesting for, if applicable (use date format yyyy-mm-dd): From Jan 1, 2015 To March 1, 2016

Contact Information		
<input checked="" type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss	First Name Curtis	Last Name Panke
Street No. 3372	Street Name Trelawny Circle	Suite/Unit No.
City/Town Mississauga	Province Ontario	Postal Code L5N 6N6
Telephone No. 416-574-6478	Alternate No.	E-mail CurtisPanke@Cmail.Carleton.ca
Signature Curtis Panke	Date (yyyy-mm-dd) 2016-03-10	

Before sending your request, ensure you have:

- Provided a detailed description of the information or records you are requesting
- Included the \$5 application fee (cash, cheque or money order), payable to the City of Toronto
- If requesting personal information or personal health information, include a photocopy of a signed, government-issued identification (i.e. Driver's Licence or Passport)
- If correcting personal information or personal health information, indicate the desired correction and attach supporting documentation

**Mail request to:** Access and Privacy Unit, City Hall, 13<sup>th</sup> Floor, West Tower, 100 Queen Street West, Toronto, Ontario, M5H 2N2.

For further information about information requests, please visit [www.toronto.ca/accessingcityinformation](http://www.toronto.ca/accessingcityinformation) or call 416-392-9684.

Office Use Only		
Date Received (yyyy-mm-dd)	Request No.	Type of Request
		<input type="checkbox"/> MFIPPA <input type="checkbox"/> PHIPA <input type="checkbox"/> Both <input type="checkbox"/> Access to General Records <input type="checkbox"/> Access to Personal Information/Personal Health Information <input type="checkbox"/> Correction to Personal Information/Personal Health Information

The personal information on this form is collected under legal authority of the Municipal Freedom of Information and Protection of Privacy Act, R.S.O.1990, Chapter M.56 and/or the Personal Health Information Protection Act, S.O. 2004, Chapter 3, Schedule A. The information will be used for the purpose of responding to your request. Questions about this collection can be directed to the Manager, Access and Privacy Unit, City Hall, 13<sup>th</sup> floor, West Tower, 100 Queen Street West, Toronto, Ontario M5H 2N2 or by telephone at 416-392-9684.