



Region of Queens Municipality

Application for Access to a Record

Part XX – Freedom of Information and Protection of Privacy Municipal Government Act s466(1)

Please submit your request by completing the following form and submitting the \$5.00 application fee to:

Angela Green
Municipal Clerk
Region of Queens Municipality
249 White Point Rd.
Liverpool, NS
B0T 1K0

Name of Applicant:

Mailing Address:

Telephone Number:

Email Address:

Signature:

1. Please indicate the type of information you are requesting.

- My own personal information
- General information
- Information relating to a third party
- Other



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2. Please specify the information you are requesting. If possible, specify the name of the record, date or date range the record was created, type of record, what the record is about, and any other information you can provide. You are welcome to attach separate page with this information. Please note that if the request is too general, the time needed to respond to the request may be extended.

3. I would like to :
 - Examine the record
 - Receive a copy of the record