

Instructions:

This form is designed to assist you to submit a privacy complaint about how the Township is collecting, using or disposing of your personal information under the *Freedom of Information and Protection of Privacy Act* (FIPPA).

**Notice of Collection:** The personal information on this form is collected by the Township of Esquimalt to assist with helping to resolve your privacy complaint, under the authority of section(s) 26 (c) and (d) of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, please contact the Privacy Team at 1229 Esquimalt Road, Esquimalt, BC V9A 3P1 by telephone 250-414-7118, or by emailing: [foi@esquimalt.ca](mailto:foi@esquimalt.ca)

Full Name: \_\_\_\_\_

Are you submitting this complaint on behalf of someone else? Yes \_\_\_\_\_ No \_\_\_\_\_

How would you like us to contact you? You can provide your email address or your mailing address.

Email: \_\_\_\_\_

OR

Mailing Address: \_\_\_\_\_

Town: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Contact Telephone#: \_\_\_\_\_

Which department does your complaint concern? \_\_\_\_\_

Have you tried contacting anyone at the Township to resolve your complaint? Yes \_\_\_\_\_ No \_\_\_\_\_

<b>Complaint:</b>	<input type="checkbox"/> Unauthorized disclosure of your personal information
	<input type="checkbox"/> Inadequate security of your personal information
	<input type="checkbox"/> Refusal to correct or annotate records containing your personal information
	<input type="checkbox"/> Other: _____

Summarize your request for review or complaint:\*

Summarize what Resolution / Remedy are you seeking:\*

Signature (Legal Name): \_\_\_\_\_ Date: \_\_\_\_\_

\*Please continue on the second page or attach a letter if there is not enough room on this form.

**CORPORATE SERVICES**  
**PRIVACY COMPLAINT**

Further Information can be provided here: