



1229 Esquimalt Road  
 Esquimalt BC V9A 3P1  
 PHONE: 250-414-7100  
 FAX: 250-414-7111  
 www.esquimalt.ca

## Request for Correction of Personal Information

<b>Part 1: APPLICANT INFORMATION</b>		
Name		
Address		
City/Town	Province	Postal Code
Phone No.	Email Address	
<b>Part 2: DETAILS OF CORRECTION</b>		
Please describe the correction you are requesting. Be as specific as possible, as this will assist the request process. Attach a separate sheet if the space below is not sufficient.		Specify any Reference numbers or File ID's if known:
<b>Part 3: APPLICANT SIGNATURE</b>		
You may make a request for correction of personal information without using this form, provided you do so in writing.		
Signature		Date
<b>Submit your application to the Corporate Officer via email to <a href="mailto:foi@esquimalt.ca">foi@esquimalt.ca</a></b> <b>or in person at Municipal Hall, 1229 Esquimalt Road.</b>		
<b>DEPARTMENT USE ONLY</b>		
Request No.:	Date Received:	Decision: Correction Made: <input type="checkbox"/> Correction Denied: <input type="checkbox"/>
FOI Head/Coordinator Signature:		Reason for Decision:

The personal information contained on this form is collected under Section 26(c) of the Freedom of Information and Protection of Privacy Act and will be used for the purpose of processing the application. If you have any questions about the collection or use of this information, please contact the Township of Esquimalt's Privacy Team at [foi@esquimalt.ca](mailto:foi@esquimalt.ca), or 1229 Esquimalt Rd, Esquimalt, BC, V9A 3P1.