

Access to records request

Freedom of Information and Protection of Privacy Act

Type of request

 Access to general records (non-personal information) Access to own personal information

Access to other's personal information by authorized party (please attach appropriate document proving your authority)

Requestor's information

Last name		First name			Middle initial	
Relationship to PGT client						
Address						
Phone		Email				
PGT client's int	formation		This indicat	es permission to contac	t you by email.	
Client name		File	number			
Date of birth		Date	of death			

Description of records requested (please be as specific as possible to assist the search process)

Time period of the records requested, if applicable

Method of access

From	То		Receive a copy	Examine original (on site only)
Applicant's signature		Date		

Information you provide is for the purpose of making a request for access to records. Information is collected under the Freedom of Information and Protection of Privacy Act (FOIPPA) and other applicable legislation. If you have any questions about the collection, use or disclosure of information, contact the PGT's Information and Privacy Officer at 604-660-4444 or <u>mail@trustee.bc.ca</u>

Once completed please mail, fax or email to PGT Information Access along with documents proving your authority (if applicable).

PGT – Information Access	Email	mail@trustee.bc.ca
700-808 West Hastings Street	Fax	604-775-0207
Vancouver, BC V6C 3L3		