

## Freedom of Information (FOI) Access Request Form

**Instructions:**

Submit this form and you will be contacted for the \$5 application fee (see payment options at the bottom of this form) to: **By Mail** **By Email:**

Grey Bruce Public Health  
101 17th Street East,  
Owen Sound, ON N4K 0A5  
Attention: Privacy Officer

For inspection records: [Inspections@publichealthgreybruce.on.ca](mailto:Inspections@publichealthgreybruce.on.ca)  
For all other FOI requests: [Privacy@publichealthgreybruce.on.ca](mailto:Privacy@publichealthgreybruce.on.ca).

If you are requesting access to records of your own personal information, you must attach a copy of government-issued photo identification (for verification of identity).

If you are looking for septic records, please contact your municipality.

If you have any questions or need assistance completing this form, please contact us at the above email.

**Requester Information:**

First Name:

Last Name:

Address:

(Street #/Apt #/P.O. Box #/R.R. #)

City/Town

Province

Postal Code

Telephone:

Email:

**Records Requested:**

**Preferred Method of Access to Records:**

- Electronic (Secure Email)
- Paper

**Preferred Method of Payment:**

- Cash
- Cheque (made payable to Grey Bruce Public Health)
- E-Transfer
- Credit Card (you will be contacted to arrange payment)

**Date:**

(YYYY/MM/DD)