

This form is to be filled in by the ATIPP Coordinator and **should not include any personal information** that was collected under Newfoundland and Labrador's *Access to Information and Protection of Privacy Act* on **FORM 1**. Send this form to the ATIPP Office who will provide you with an access request file number. **See instructions below.**

Access Request Information

To which public body has the applicant made a request?	
Date access request received by public body?	

Type of Request? (please check one)

General Information
Personal information of applicant
Personal Information for another person (<i>check if proof of authority was received</i>)

The applicant wishes to obtain access to the following information/records:

Name of ATIPP Coordinator: _____

Date: _____
YYYY-MM-DD

For ATIPP Office Use Only

Date Received: _____ File #: _____

Instructions

Form 1A is to be filled out by the ATIPP Coordinator.

Once completed, the ATIPP Coordinator must send a copy of the form to the ATIPP Office for statistical purposes and to receive an access request file number:

- email (atippoffice@gov.nl.ca)
- fax (729-2129)
- mail (ATIPP Office, 5th Floor East Block, Confederation Building, PO Box 8700, St. John's, NL, A1B 4J6)

Provide a copy of the request verbatim; otherwise summarize the request if the applicant has revealed personal information which may reveal the applicant's identity.

Keep a copy of this record in your file with Form 1 (Original Access Request filled out by applicant).

The *Access to Information and Protection of Privacy Act* can be found at <http://assembly.nl.ca/Legislation/sr/statutes/a01-2.htm>.

Should you have any questions, contact the ATIPP Office at 709-729-7072 or toll-free at 1-877-895-8891.