



## Authorization to Act as an Agent for Appeal

I, \_\_\_\_\_, hereby authorize \_\_\_\_\_  
Name of Person Appointing Agent Name of Agent

to act as my agent for the purposes of an appeal to the Information and Privacy Commissioner of Ontario under the *Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information and Protection of Privacy Act* regarding a request for personal information/correction of personal information to the \_\_\_\_\_ dated \_\_\_\_\_.  
Name of Government Organization Insert Date of Request

I further authorize the Commissioner to disclose to \_\_\_\_\_  
Name of Agent  
personal information pertaining to me as may be necessary to process my appeal.

\_\_\_\_\_  
Signature of person appointing agent

\_\_\_\_\_  
Signature of witness

\_\_\_\_\_  
Date

Agent Contact Information:

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

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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

**Note:** It is an offence to make a request for access to or correction of personal information under false pretences, pursuant to section 61(1)(c)/48(1)(c) of the *Freedom of Information and Protection of Privacy Act/Municipal Freedom of Information and Protection of Privacy Act*.