



## ATIA and POPA Complaint to a Public Body Form

You must **first** submit an Access to Information (ATI) complaint or a Protection of Privacy (POP) complaint to the public body, Westlock County, under the *Access to Information Act* (ATIA) and *Protection of Privacy Act* (POPA). If you have a complaint regarding your personal information in that it was collected, used, or disclosed improperly, complete this form.

<b>YOUR INFORMATION</b>	<b>Last Name:</b>		<b>First Name:</b>		
	<b>Name of Company or Organization (if applicable):</b>				
	Mailing Address:				
	City:		Province:	Postal Code:	
	Telephone:		Alternative Telephone:		
	Email:				

<b>DETAILS OF COMPLAINT</b>	<p><b>What is the issue?</b></p> <p><b>Details:</b></p> <p>Describe <b>what</b> personal information. <b>When</b> did it happen? <b>How</b> did the improper collection, use, or disclosure occur? <b>Who</b> was involved (if known)? <b>Why</b> do you believe it violates the Act(s)?</p>	<p>Clearly state how you believe your personal information was handled contrary to the Act(s). Be specific and provide as many details as possible. Provide any applicable supporting documents. If there is not enough room in this section, attach a sheet separately.</p>
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<b>YOUR SIGNATURE:</b> _____	<b>DATE:</b>
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**Send your completed form directly to** the Access to Information and Protection of Privacy Coordinator of Westlock County at 10336 – 106 Street Westlock, Alberta, T7P 2G1 (780) 349-3346.

<b>FOR WESTLOCK COUNTY OFFICE USE ONLY</b>	<p><b>Date Complaint Form Received:</b></p> <p><b>Comments:</b></p> <p><b>The applicant has been responded to within 30 business days of receipt of request:</b> <input type="checkbox"/></p>
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*The personal information you provide is collected under the authority of the Access to Information Act and Part 1, Section 4 of the Protection of Privacy Act. The information you provide may be entered into a computerized automated system to generate content or make decisions, recommendations or predictions and will be used only for the purpose for which the information was collected. If you have any questions about the collection, use, and disclosure of information, please contact the Access to Information and Protection of Privacy Coordinator of Westlock County at 10336 - 106 Street Westlock, Alberta, T7P 2G1 (780) 349-3346.*

## Instructions for Complaint to a Public Body Form

You can submit an Access to Information or Protection of Privacy complaint directly to Westlock County without making a request to the Office of the Privacy Commissioner of Alberta (OIPC) under the *Access to Information Act* (ATIA) and *Protection of Privacy Act* (POPA).

**First**, always contact the public body, Westlock County. Your request will be responded to within 30 business days. If you receive no response or are not satisfied with the municipality's response, then under the Acts you can refer your request to the OIPC through their website <https://oipc.ab.ca>.

To determine whether you need to make a complaint under the Act(s) or if you need help completing the form, contact the Access to Information and Protection of Privacy Coordinator of Westlock County at 10336 - 106 Street Westlock, Alberta, T7P 2G1 (780) 349-3346.

### YOUR INFORMATION

Complete:

- Last name.
- First name.
- Name of company or organization (if applicable).
- Mailing address.
- City, Province, and Postal Code.
- Telephone number and Alternate phone number.
- Email.

### Where to send the completed complaint form and any accompanying documentation attached to the form

Send your completed form and any supporting documents, as applicable, to the Access to Information and Protection of Privacy Coordinator of Westlock County at 10336 - 106 Street Westlock, Alberta, T7P 2G1

### DETAILS OF COMPLAINT

#### What is the issue?

- Clearly state how you believe the personal information was handled contrary to the Act(s). Be specific and provide as many details as possible.

#### Details:

- Describe the following:
  - **What** personal information.
  - **When** did it happen?
  - **How** did the improper collection, use, or disclosure occur? **Who** was involved (if known)?
  - **Why** do you believe it violates the Act(s)?

### YOUR SIGNATURE AND DATE

Sign and date the form.