



## Office of the Information and Privacy Commissioner for Nova Scotia

### PRIVACY REQUEST FOR REVIEW FORM under the Privacy Review Officer Act [PRO Act]

**IMPORTANT:** Before filing a Privacy Request for Review with the Information and Privacy Commissioner, you **must** first have completed the public body's internal privacy complaint procedure pursuant to s. 5(2) of the Privacy Review Officer Act.

#### **Your Contact Information:**

Name

Address

City/Town/Community

Province

Postal Code

Preferred Contact Number

Alternate Contact Number

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#### **Public Body Information:**

Name of the Public Body the complaint relates to and where applicable, the department and address:

#### **Details of Privacy Complaint**

##### **I have reason to believe that one or more of the following has occurred:**

The Public Body has inappropriately collected my personal information.

The Public Body has inappropriately used my personal information.

The Public Body has inappropriately disclosed my personal information.

The following **must** be attached to this form or it may be rejected and returned to you:

Copy of your Privacy Complaint filed with the Public Body; and

Copy of the Public Body's response letter to your Privacy Complaint.

OR

Copy of the Public Body's privacy breach notification letter.

### **Details of Privacy Complaint ( cont'd)**

Provide the specifics of your privacy complaint here.

What resolution or remedy are you seeking?

*Attach additional pages as required.*

**NOTE:** Under the Privacy Review Officer Act, the Information and Privacy Commissioner's staff is required to provide a copy of your completed form to the public body referenced in your Request for Review. This means the Commissioner's staff is going to contact the public body that you are filing this complaint about. If you have concerns about this requirement, please make them known to the OIPC staff when you file this Request for Review.

It may be necessary for the OIPC staff to access your personal information as part of our investigation of your Request for Review. Will only access your personal information to the extent necessary in conducting this review. Any information accessed will be held in the strictest confidence. If you have any questions or concerns about this please make them known to the OIPC staff when you file this Request for Review.

**By checking this box I confirm that all the information contained in this Form and attachment(s) is accurate to the best of my knowledge and I confirm that I have read the note and privacy statement above.**

### **Signature**

Signature of Applicant:

Date:

**Submit your completed form to the Office of the Information and Privacy Commissioner:**

PO Box 181  
Halifax, NS B3J 2M4

Fax: (902) 424-8303  
Email: oipcns@novascotia.ca

**If you have questions about completing this form, please call us:  
(902) 424-4684 or No Charge-dial: 1-866-243-1564**