

Office of the Information and Privacy Commissioner for Nova Scotia

APPLICATION TO DISREGARD FORM

A public body¹ must use this form to apply for approval to disregard an access request, a correction request or a privacy complaint under the *Freedom of Information and Protection of Privacy Act, Part XX of the Municipal Government Act and/or the Privacy Review Officer Act.* It must be received by the Commissioner no later than 14 days after receiving the request.

Please see our <u>Application to Disregard (access, correction, privacy) Guide for Public Bodies and Applicants</u>, to assist you in completing this form. You must complete and send this form to <u>oipcns@novascotia.ca</u>. Please put this in the subject line of the email: URGENT – Application to Disregard.

The public body will not be given another opportunity to provide information about the application to disregard unless the Commissioner asks for further information or clarification.

Do not include information that can identify the applicant who made the access request.

Public Body Information

Public Body Name	
Public Body File Number(s)	
Related OIPC File Number(s)	
Contact Person	
Contact Phone Number	
Contact Email	

¹ For the purposes of this form, reference to public body includes municipalities

Summary and Background

Provide original access request wording together with any subsequent changes or modifications to request wording or attach a copy of the access request to your application. Remove or anonymize all identifying personal information.

Reason for Dis	regard Appli	ication (chec	k all that	apply

•	
	Access Request
	Correction Request
	Privacy Complaint

Type of File:

Reason:	
\square Trivial, frivolous or vexatious	
\square Already provided/corrected/not the applica	nt's personal information
\square Abuse of process – unduly repetitive or syst	emic
\square Abuse of process – excessively broad or inc	omprehensible
☐ Abuse of process – not made in good faith	
☐ Unreasonable interference - repetitious or :	systematic

Provide an explanation why you require approval to disregard the request in relation to the reasons above. Include any additional remedy you seek. Provide clear and convincing evidence to support your application. Please see our <u>guidance document</u> to assist you in completing this form.

Other information
You may provide additional comments or information you believe will assist in determination of this application. This could include the history, nature and number of previous interactions with this applicant.
number of previous interactions with this applicant.
You may attach additional documents if you believe it necessary. Remove or anonymize all identifying personal information from attachments.
\square I am attaching documents to this application.
☐ I am not attaching any documents.