

MUNICIPALITY OF THE DISTRICT OF SHELBURNE

ACCESS TO INFORMATION POLICY

PURPOSE MGA s. 462

1. (a) The purpose of this Policy is to ensure that the Municipality of the District of Shelburne is fully accountable to the public by:

1. Giving the public a right to access of records,
2. Giving individuals a right to personal information about themselves,

(b) The Municipality will provide the disclosure of all municipal information with necessary exemptions, that are limited and specific, in order to

1. Facilitate informed public participation in policy formulation,
2. Ensure fairness in government decision making,
3. Permit the airing and reconciliation of divergent views,
4. And protect the privacy of individuals with respect to personal information about themselves held by the Municipality and to provide individuals with the right of access to that information.

RESPONSIBLE OFFICER

MGA s. 461 i

2. The Responsible Officer for the purposes of this policy is the Chief Administrative Officer.

PROCEDURE FOR OBTAINING ACCESS

MGA s. 466,467

3. (a) A person may obtain access to information by:

1. Filling out the "Application for Access To a Record" (attached)
2. Paying the fee required pursuant to this policy.

(b) The Chief Administrative Officer will respond in writing to the applicant within 30 days after the application has been received.

MGA s.469

(c) Extension time for a response

The Chief Administrative Officer may extend the time for responding to a request for up to thirty days or longer if:

1. The applicant does not give enough detail to enable the Municipality to identify a requested record;
2. A large number of records is requested or must be searched and meeting the time limit would unreasonably interfere with the operations of the Municipality; or
3. More time is needed to consult with a third party before the Chief Administrative Officer can decide whether or not to give the applicant access.

REFUSAL TO DISCLOSE INFORMATION

4. The CAO may refuse to disclose an applicant information pursuant to relevant sections of the Municipal Government Act.

FEES

Freedom of Information and
Protection of Privacy Regulations
s. 6

5. (a) An applicant who makes a request for access to a record pursuant to this Policy must pay to the Municipality an application fee in the amount of \$25.00.

(b) There is no charge for applications for the applicants own personal information or correction of an applicants personal information.

(c) If the application is for access to general records, the applicant may also be charged for:

1. the cost of staff time to locate and retrieve information;
2. the cost of staff time to prepare the records; and
3. photocopying, mailing, and if applicable, fax charges.

The fee for these services may be \$15.00 for each half hour of staff time and \$0.20 for each photocopy.

**APPLICATION FOR ACCESS TO A RECORD
MUNICIPALITY OF THE DISTRICT OF SHELBURNE
ACCESS TO INFORMATION POLICY**

TO:

CHIEF ADMINISTRATIVE OFFICER, KIRK COX
MUNICIPALITY OF THE DISTRICT OF SHELBURNE
PO BOX 280, 136 HAMMOND STREET
SHELBURNE, NS
BOT 1WO
(F) 902-875-1278

1. This is an application pursuant to the Municipal Government Act (MGA) for access to (check one):

- (a) applicant's own personal information; or
 (b) other information; or
 (c) both applicant's own personal information and other information.

2. I am applying for access to the following record:

(Below, identify the material applied for precisely by including such particulars as the specific event or action to which it refers, the date of the record or the date or period to which it relates, the type of record (document, report, letter, etc.), names of department personnel who prepared or may have knowledge of the information, or citations to newspapers or publications which are known to have referred to the record.)

3. I wish to (check one):

- (a) examine the record; or
 (b) receive a copy of the record.

4. I understand that I may be required to pay a fee before obtaining access to the record.

Date: _____

Signature of Applicant: _____

Print Full Name of Applicant: _____

Mailing Address of Applicant: _____

(Street, P.O. Box, etc.)

(Municipality, Province/Postal Code)