



**FORM #4 - Consent to Use Personal Information**  
 Part XX – Freedom of Information and Protection of Privacy Act  
 \*Clause 26(b)

TO: Carl Yates, M.A.Sc., P. Eng.,  
 General Manager, FOIPOP Coordinator  
 Halifax Water  
 450 Cowie Hill Road  
 PO Box 8388, RPO CSC  
 Halifax NS B3K 5M1

(Telephone) 902-490-4840  
 (Fax) 902-490-4808

1. I, \_\_\_\_\_(specify name of consenting individual), of  
 \_\_\_\_\_(address), do hereby  
 give consent to \_\_\_\_\_  
 (Halifax Water) and the responsible officer thereof to:

(a) Disclose to \_\_\_\_\_ (name of person or body), of

\_\_\_\_\_  
 (address), the following information about me:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(if insufficient space, list additional information on separate page)

**and**

(a) to use the information for the following purposes:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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Date: \_\_\_\_\_

Signature of Person Consenting: \_\_\_\_\_

Print Full Name of Person Consenting: \_\_\_\_\_

Mailing Address of Person Consenting: \_\_\_\_\_  
(Street/Apartment No./R.R. No.)

\_\_\_\_\_  
(Community and Province)

\_\_\_\_\_  
(Postal Code)

Telephone Numbers of Person Consenting: (Residence) \_\_\_\_\_

(Business) \_\_\_\_\_

Fax Number of Person Consenting: \_\_\_\_\_

E-mail Address of Person Consenting: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Application No: \_\_\_\_\_

**Collection & Use Disclosure Statement**

In accordance with Section 485 of the Municipal Government Act, the personal information collected on this form will only be used and/or disclosed if necessary, for the purpose of processing this Access to Information Application. If you have any questions about the collection and use of this information, please contact Halifax Water's Privacy Officer at 490-4840 or [general\\_manager@halifaxwater.ca](mailto:general_manager@halifaxwater.ca)