



Consent to Disclose Personal Information

The Corporation of the Town of Ingersoll is requesting written authorization by means of this form to disclose your personal information to a third party pursuant to section 32(a) of the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O., 1990. Please note that this consent is valid until it is revoked in writing. Applicable fees may apply. Please complete this authorization form and bring it to the Town of Ingersoll, Taxation Department. Please see below for fax and email.

I, being the individual to whom the personal information relates,

Name _____

Property Address _____

Tax Roll Number _____

Do hereby give permission to an authorized staff member of the Town of Ingersoll to disclose my Property Tax Account information to the third party listed below:

Signature

Date

Witness

Date

Please describe in detail below the information to be disclosed to the third party (e.g., address, details of arrears, account number, telephone number) and the reason the information is being requested:

Third Party Authorized to Receive the Personal Information

Name/Organization _____

Address _____

Telephone Number _____ Fax Number _____

Email Address _____

Personal information contained on this form is collected pursuant to the *Municipal Freedom of Information and Protection of Privacy Act*. This information is collected to complete the Consent to Disclose Personal Information Form. Any questions related to the collection of this information should be directed to the Finance/Tax Department.