



OFFICE OF THE  
INFORMATION & PRIVACY  
COMMISSIONER  
OF ALBERTA

## *Personal Information Protection Act* *OIPC Complaint Form*

**Instructions:** Use this form to start a **privacy complaint** or a **request for review** of an organization's response to your personal information access request to the Information and Privacy Commissioner of Alberta under the *Personal Information Protection Act*.

**Do not use this form** if your privacy issue is with a government or other public body, or with a custodian under the *Health Information Act*.

The *Personal Information Protection Act* and **materials that may assist you** in completing this form are available at <http://www.oipc.ab.ca> or by calling (403) 297-2728. For toll-free access call 1-888-878-4044.

### **Disclosure Notice:**

Be aware that a copy of this form **will be** provided to the organization concerned and any other person that the Commissioner considers appropriate **if your dispute involves a denial by the organization to allow access to your personal information**. A copy of this form **may be** provided to the organization concerned and any other person that the Commissioner considers appropriate **if your complaint is about anything else**.

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

**Contact Phone No:** \_\_\_\_\_  Home  Work  Cell  Pager # \_\_\_\_\_  
(include area code) extension # \_\_\_\_\_

**Alternative Phone No:** \_\_\_\_\_  Home  Work  Cell  Pager # \_\_\_\_\_  
(include area code) extension # \_\_\_\_\_

**Fax No:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_  
(include area code) (Provide only if you prefer to receive communications by e-mail)

Please indicate the best time to contact you, as well as any contact restrictions: (*The Information and Privacy Commissioner of Alberta office hours of work are Monday to Friday 8:15 am to 4:30 pm*)

1. Are you making this complaint or request for review:  on behalf of yourself?  
(Check one box only)  on behalf of another individual?  
(Attach supporting documentation if you checked "on behalf of another individual".)

2. Which **organization** (for example, name the business, non-profit association, private school, union, religious organization, etc.) is your question, complaint or request for review about. *(Please identify by specific name. Provide legal name of organization, if known.)*

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3. a) Summarize your complaint and any steps you have taken to try to resolve it: *(Please indicate any file or reference numbers and relevant dates, including the date of the complaint)*

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- b) Have you attempted to resolve the matter with the organization?  Yes  No

**(If yes, please attach a copy of any correspondence you may have sent/received)**

- c) Did you write to the organization outlining your concerns?  Yes  No

**(If yes, please attach a copy of your letter to the organization and their response to you, if any)**

- d) Did you write to object to the organization's initial decision?  Yes  No

**(If yes, please attach a copy of your letter to the organization and their response to you, if any)**

If yes to the questions above, when was the last communication from the organization and what was the result?

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4. Who have you dealt with at the organization? *(List the names, titles, phone numbers or addresses of people you have had contact with.)*

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5. If you requested **access to your personal information** or **to correct your personal information**, have you received a written decision from the organization?

Yes  No If "yes", what is the date of the letter and when did you receive it?

**Please attach a copy.**

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6. a) Where did the transaction or situation you are referring to occur? (Name province, territory or country)

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b) Do you believe your personal information was sent outside the province? Explain.

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7. Are you, or were you, an employee of the organization? ?  Yes  No

8. Have you made a **Complaint or Request for Review** to a privacy commissioner in another Canadian jurisdiction regarding this situation?  Yes  No

If "Yes", name the province or "Canada" for federal commissioner:

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**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**Attach copies of the following documents if you have them:**

- Any other correspondence between you and the organization on this matter
- Any documentation that indicates that you are authorized to act for another individual (if you answered "Yes" to question 1)
- The organization's privacy policy and practices (optional)
- Other \_\_\_\_\_

**Send Intake Form to:**

Office of the Information and Privacy  
Commissioner of Alberta  
Suite 2460, 801 - 6<sup>th</sup> Avenue SW  
Calgary, AB  
T2P 3W2

Fax: (403) 297-2711  
Phone: (403) 297-2728

**We cannot accept complaints or requests for review by electronic mail.**

**Box below reserved for OIPC date stamp**

**Box below reserved for OIPC staff**

**Received by:**  
Initials: \_\_\_\_\_  
  
\_\_\_\_\_  
(Print Name)