

GREATER SUDBURY POLICE SERVICE FINGERPRINT AND PHOTO IMAGE DESTRUCTION APPLICATION FORM

		NAL INF	ORMATION				
Surname	First Name			Middle	Name		
Surname at time of Arrest	First Name at time of Arrest			Middle	Name at time of Arrest		
Date of Birth							
Address		Postal Code		Teleph	none Number		
AGENT			MATION (if appl	icable)			
Surname		First	Name	nouble)			
Name of Firm							
Address				Telep	hone Number		
		CHARG					
Charge	FI	nal Cour	t Date		Disposition		
		CONSE	NT				
I have he request the Orester Cudhum, Delies Comies to consider destroying out for some integers in the bate income							
I hereby request the Greater Sudbury Police Service to consider destroying my fingerprints and photo images for the charges listed above. I acknowledge that I will be notified in writing once the process has been completed.							
also acknowledge that this request may not be granted if the circumstances of this request do not meet the							
eligibility criteria established by the G	reater Sudbu	iry Police	e Service.		•		
Signature of Applicant			Date				
TO BE COMPLETED BY ACCESS TO INFORMATION UNIT							
Action	PLETED BY		leted By/Employ		Date		
Request Approved		Comp		001101	Dato		

Applications must be submitted to the Greater Sudbury Police Service 190 Brady St., Sudbury Ontario. P3E 1C7