

ATIPPA, 2015 Form

Cost Review Complaint

A person who received a cost estimate from a public body associated with their access request may use this form to request the Commissioner revise the cost estimate as provided for in section 26(2) of the **Access to Information and Protection of Privacy Act, 2015** (ATIPPA, 2015).

A person who requested a public body waive all or part of the costs associated with their access request may use this form to request the Commissioner review the public body's decision as provided for in section 26(4) of ATIPPA, 2015.

You can complete and send this form to commissioner@oipc.nl.ca. You can also send your complaint by mail to the Office of the Information and Privacy Commissioner, PO Box 13004, Station A, St. John's, NL A1B 3V8, or by fax to 709-729-6500. Information in this form is being collected to process and investigate your complaint.

The Office of the Information and Privacy Commissioner (OIPC) will send a copy of this form to the public body. In order to conduct our investigation, it may be necessary for OIPC to access and review your personal information. Collection of your personal information by OIPC is authorized by section 61(c) of ATIPPA, 2015. If you have any questions or concerns, please contact [OIPC's Privacy Officer](#) at 709-729-6309 or toll free at 1-877-729-6309.

Date of Cost Review Complaint: _____

I am making this complaint on behalf of: myself another person

If you are making this complaint on behalf of "another person," please provide supporting documents authorizing you to act on their behalf.

Section 1: Your Information	
Name	
Organization (if applicable)	
Mailing Address Please provide your <u>complete</u> mailing address.	
Phone Number	
Email	

Section 2: Public Body Information	
Public Body Name	
Public Body File Number	
Date of Your Access Request	

Please attach a copy of any correspondence you received from the public body about your access to information request and the cost estimate.

- I have attached correspondence I received from the public body about my request.
- I have attached the cost estimate.
- I am not attaching any correspondence.

Section 3: Reason for Complaint (check all that apply)
<input type="checkbox"/> I am seeking a review of the public body's cost estimate associated with my request.
<input type="checkbox"/> I am seeking a review of the public body's refusal to waive all or part of the costs associated with my request.

Section 4: Details of Your Complaint

Section 5: Resolution or Remedy You Are Seeking