



Saanich Police Department
 760 Vernon Avenue, Victoria BC V8X 2W6 Phone: 250-475-4321
**Application for Destruction of Fingerprints
 And Photograph**

Saanich Police Use Only
Date:
Received by:

IDENTIFICATION – one form must be photo ID (office use only).

Type of ID Produced:	Number:
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Personal information on this form is collected under British Columbia's Freedom of Information and Protection of Privacy and will be used to respond to your request.

Attn: Information Records Clerk

This is to request that my fingerprints and photograph be destroyed. I acknowledge that I will be notified in writing at the address provided below when the application process has been completed. I also acknowledge that this request may not be granted as the Saanich Police Department is not obliged to destroy lawfully obtained fingerprints and photographs.

PERSONAL INFORMATION (COMPLETED BY APPLICANT) *PLEASE PRINT*

LAST NAME	FIRST NAME	MIDDLE NAME(S)
PREVIOUS NAMES (including name changes and birth/maiden name)		SEX <input type="checkbox"/> M <input type="checkbox"/> F
DATE OF BIRTH (YYYY/MM/DD)	PLACE OF BIRTH:	
ADDRESS (Apartment, street # and name)	CITY	PROV POSTAL CODE
PHONE NUMBER (residence)	PHONE NUMBER (cell)	
CHARGE(S)		
COURT LOCATION	FINAL COURT DATE	

Any additional information you feel may be required:

X _____
Signature of Applicant

Date of Request