



Toronto Police Service
To Serve and Protect

FINGERPRINT AND PHOTOGRAPH DESTRUCTION - APPLICATION FORM

Please refer to the *Destruction of Fingerprints and Photographs Procedure* for information about this process.

This form is being completed by:

The applicant

A lawyer or authorized representative acting on behalf of the applicant

APPLICANT INFORMATION

Surname	First Name	Middle Name			
Surname (at time of arrest)	First Name (at time of arrest)	Middle Name (at time of arrest)			
Contact Telephone Number	Date of Birth	YYYY	MM	DD	
Address	Number/Unit	Street	City	Prov.	Postal Code

AGENT / LAWYER INFORMATION

(only to be completed if you are acting on behalf of the applicant)

Surname	First Name	Contact Telephone Number			
Name of Firm					
Address	Number/Unit	Street	City	Prov.	Postal Code

Please indicate who the correspondence should be sent to.

Applicant

Agent/Lawyer

CHARGES (Optional — if known, please provide details)

Final Court Date	Court Location	Charge	Disposition

CONSENT TO DESTROY FINGERPRINTS, PHOTOGRAPHS AND CRIMINAL HISTORY

I, _____ hereby request the Toronto Police Service to consider destroying my fingerprints and photographs for the charges listed above. I acknowledge that I will be notified in writing, to the address provided above, when a decision has been made and when the process has been completed. **NOTE:** Other records pertaining to your arrest(s) may exist, e.g. Toronto Police Service Record of Arrest report. These documents will not be destroyed pursuant to your application for destruction of fingerprints and photographs. Rather, they are subject to retention under the **City of Toronto Municipal Code Chapter 219, Article 1.**

Date