



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 (Fields marked with an asterisk (*) are required)

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 _____

Submit request to criminalrecords@torontopolice.on.ca or
 40 College St., Toronto, Ontario, M5G 2J3, Attn: Criminal Records