

FORM #6 - Notice of Disclosure
Part XX – Municipal Government Act
*Subsection 31(3)

NAME OF THIRD PARTY: _____

LAST KNOWN ADDRESS: _____

TAKE NOTICE that on the _____ day of _____, 20____, I _____ (name of responsible officer), responsible officer of Halifax Water at 450 Cowie Hill Road, PO Box 8388 RPO CSC, Halifax, NS B3K 5M1, disclosed to _____(specific the public, affected group of people or applicant) certain information relating to you and which is described in Schedule “A” attached to this Notice of Disclosure.

It was not practicable to notify you before disclosing the information.

The information disclosed was:

Check if Applicable:

- _____ (a) about a risk of significant harm to the environment;
- _____ (b) about a risk of significant harm to the health or safety of the public;
- _____ (c) about a risk of significant harm to (specify affected group of people);
- _____ (d) disclosed in the public interest because (state any other public interest reason for disclosure)

Dated at _____, Nova Scotia, this _____ day of _____, 20____.

Signature of Responsible Officer of Halifax Water

SCHEDULE "A"

Particulars of the information disclosed are as follows:

Collection & Use Disclosure Statement

In accordance with Section 485 of the Municipal Government Act, the personal information collected on this form will only be used and/or disclosed if necessary, for the purpose of processing this Access to Information Application. If you have any questions about the collection and use of this information, please contact Halifax Water's Privacy Administrator at privacy@halifaxwater.ca