

Acknowledgement

I am hereby informed that the personal information I provide on this request for recourse and throughout the associated recourse process is collected under the authority of the *Canadian Food Inspection Agency Act* and is protected under the *Privacy Act*. I further understand that the Canadian Food Inspection Agency may use it to resolve the associated recourse processes and/or for statistical purposes, and hereby consent to its use and disclosure for these purposes. I further understand that I may obtain access to, request correction of or have a notation added to the personal information I provide, and agree that these too may be used and disclosed by the Agency to resolve the associated recourse process and for statistical purposes.

Signature

YYYY/MM/DD

For Office Use Only

Deadline for issuance of Request for Decision Review:

Date Request for Decision Review issued:

YYYY/MM/DD

YYYY/MM/DD