

Fingerprint and Photograph Destruction Application

Personal information on this form is collected under the British Columbia Freedom of Information and Protection of Privacy Act and will be used to respond to your request.

PERSONAL INFORMATION					
Surname		First Name		Middle Name	
Surname (at time of arrest)		First Name (at time of arrest)		Middle Name (at time of arrest)	
Date of Birth	YYYY	MM	DD	Telephone/Cell Number	
Address	Number/Unit	Street	City	Province	Postal Code
AGENT/ LAWYER INFORMATION (if applicable)					
Surname		First Name		Telephone number	
Name of Firm					
Address	Number/Unit	Street	City	Province	Postal Code
CHARGES					
Court date	Charge		Disposition	Location	
CONSENT TO DESTROY FINGERPRINTS, PHOTOGRAPHS AND CRIMINAL HISTORY					
<p>I hereby request that the Delta Police Department consider the destruction of my fingerprints and photographs for the charges listed above. I acknowledge that I will be notified in writing at the address provided above when the application has been received and again when the destruction process has been completed.</p> <p>I am also aware that only my biometric data (fingerprints, photographs and the record of the disposition) will be destroyed and the <u>reports related to the incident will not be destroyed</u>. Furthermore, I understand that only records of non-convictions can be destroyed. To obtain a record suspension relating to a conviction registered with the Delta Police Department, an application must be filed with the Parole Board of Canada.</p>					
Date _____, 20____			Signature _____		

PLEASE ATTACH A PHOTOCOPY OF ONE PRIMARY PHOTO ID AND SUBMIT IT WITH THIS APPLICATION

Mail to:

Delta Police Department
4455 Clarence Taylor Crescent
Delta , BC, V4K 3E1

Email to: Deltacl@deltapolice.ca

For more information or any questions, please contact us at 604-946-4411 and ask for Court Liaison.