ATIPPA, 2015 Form Time Extension Application

A public body may use this form to apply for an approval to extend the time for responding to an access request. Section 23 of the Access to Information and Protection of Privacy Act, **2015** (ATIPPA, 2015) states:

- (1) The head of a public body may, not later than 15 business days after receiving a request, apply to the commissioner to extend the time for responding to the request.
- (2) The commissioner may approve an application for an extension of time where the commissioner considers that it is necessary and reasonable to do so in the circumstances, for the number of business days the commissioner considers appropriate.
- (3) The commissioner shall, without delay and not later than 3 business days after receiving an application, decide to approve or disapprove the application.

Please see our guidance document to assist you in completing this form.

You can complete and send this form to commissioner@oipc.nl.ca.

If you have any questions or concerns, please contact OIPC at 709-729-6309 or toll free at 1-877-729-6309.

Do not include information that can identify the applicant who made the access request.

Date of Time Extension Application:

| Section 1: Public Body Information | | |
|------------------------------------|--|--|
| Public Body Name | | |
| Public Body File Number | | |
| Contact Person | | |
| Contact Phone Number | | |
| Contact Email | | |



Section 2: Summary and Background

| Date Access Request Received | |
|--|--|
| Original Due Date of Request | |
| Length of Time Extension Requested (business days) | |
| Proposed New Due Date | |

Provide original access request wording together with any subsequent changes or modifications to request wording or attach a copy of the access request to your application. **Remove or anonymize** all identifying personal information.

| Section 3: Prior Extension Requests (if applicable) | | | | | | |
|---|------------------------------------|-------------------------------|--|--|--|--|
| Prior Time Extension Approved | Yes No If no, proceed to section 4 | | | | | |
| | Prior Extension Request #1 | Prior Extension Request #2 | | | | |
| Date Extension Requested | | | | | | |
| Number of Days Requested | | | | | | |
| Number of Days Approved | | | | | | |
| Revised Response Due Date | | | | | | |



| Section 4: Status of Access Request | | | | | | | |
|---|-------|----------------------------|----------------------|-------|--|--|--|
| Search for Records is Complete | | | □ Yes | 🗆 No | | | |
| Number of Pages Located | | | | | | | |
| Number of Additional Pages Expected | | | | | | | |
| Date Review of Responsive Records Began | | | 🗆 Not Yet | Begun | | | |
| Have you notified any third parties? | □ Yes | □ Not Yet □ Not Applicable | | | | | |
| Have you consulted any other public bodies? | □ Yes | 🗌 Not | Yet 🛛 Not Applicable | | | | |

Provide an explanation of the work that remains, including a list of each outstanding task and an estimate of time you need for each.





| Section 5: Reason for Time Extension Application (check all that apply) | | |
|---|--|--|
| □ Large volume of records | | |
| \Box Meeting deadline would unreasonably interfere with operations of the public body | | |
| \square Worked with applicant to clarify the request (insufficient detail in the request) | | |
| Third party consultation | | |
| \Box Consultation with another public body | | |
| Executive consultation | | |
| Difficulty gathering records | | |
| Unforeseen circumstances | | |
| Sensitivity or complexity of material | | |
| Other: | | |

Provide an explanation **why** you require an extension in relation to the reasons above. Provide **clear and convincing evidence** to support your application. Please see our <u>guidance</u> <u>document</u> to assist you in completing this form.



Section 6: Other Information

You may provide additional comments or information you believe will assist in determination of this application.

You may attach additional documents if you believe it necessary. **Remove or anonymize** all identifying personal information).

□ I am attaching documents to this application.

 \Box I am not attaching any documents.

