

Your information

Last name (required)

First name (required)

Middle initial(s)

Preferred name

Address

Unit

City

Province

Postal code

If you consent to the IPC contacting you by phone including leaving a voicemail message, please provide your phone number.

If you wish to communicate with the IPC by email, please provide your email address.

Please note that email communication is optional and the security of email communication cannot be guaranteed.

Are you (check one):

Filing a privacy complaint about your own personal information

The substitute decision-maker (such as a parent or guardian) for someone who is filing a privacy complaint about their personal information.

Substitute decision-maker information

Skip this section if you are not a substitute decision-maker.

If you are a substitute decision-maker (such as a parent or guardian) making a complaint on behalf of someone else, please describe your role and explain your relationship. It may be necessary to provide documentation to prove you are authorized to act for the individual. Please attach this documentation if you have it at the end of this form.

Representative Information

Skip this section if you do not have a representative.

You may represent yourself in a complaint to the IPC, or have someone else (such as a lawyer or another person) represent you.

If someone is representing you, and you authorize that person to act on your behalf, and you consent to the IPC to contacting them (including through email) and exchanging information about this complaint, please fill out the contact information below.

Representative is a (check one):

Lawyer Other person

Please provide your representative's contact information

Last name

First name

Middle initial(s)

Preferred name

Address

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Phone number

Email address

Information about the person or organization your complaint relates to

For example, your complaint may relate to a “service provider” organization such as a children’s aid society or a group home, or an individual.

Name of person or organization your complaint relates to

Address

Unit

City

Province

Postal code

Phone number

Email address

File number for your complaint (if applicable)

Name of contact person at organization, if applicable

Contact person phone number

Sharing your information

We would like to share your complaint with the service provider you have complained about, so the service provider understands the reasons for your complaint and the IPC can process your complaint.

By filing this complaint, you consent to share your name, this complaint form, and all attachments provided with this complaint to share your complaint information, including the service provider. We will consider whether we

If you do not consent to share your complaint information, please the service provider. We will consider whether we can properly address your complaint without sharing this information.

We may need additional personal information to process your complaint. Do you consent to the IPC looking at or asking for the personal information we need to process your complaint? (required)

YES NO

Details of your complaint

Please select all the boxes that explain why you are making the complaint:

- The person or organization the complaint relates to has inappropriately collected, used and/or disclosed (shared) my personal information
- Other – please explain:

Please provide a detailed description of your complaint. Your description should include the what, when, who, how, where and why of what happened. If you need more space, please attach as many pages as necessary at the end of this form.

Have you communicated with the service provider about your complaint? If so, please explain.

Resolution of your complaint

Do you have a suggestion about how your complaint could be resolved?

In certain circumstances, the IPC will make an order to resolve a complaint. However, it is important to note that most complaints before the IPC are resolved informally and do not result in an order. The IPC can order a service provider to grant access to requested records, order a service provider to respond to an access request, etc.

The IPC **cannot** order disciplinary measures against employees of the service provider you are complaining about (such as requiring the service provider to fire an employee) or order it to pay you financial compensation (money).

Attachments

Please attach any documents about your complaint or evidence of your role as a substitute decision-maker. The following documents have been attached (if applicable):

Signature: (required)

Signature Date: (required)
MM/DD/YYYY

Submit the form:

Save and email the form to complaints@ipc.on.ca or print and mail the form to:

Registrar
Information and Privacy Commissioner/Ontario
1400-2 Bloor Street East
Toronto, Ontario
M4W 1A8

What happens next? Someone from our intake team will contact you to discuss your complaint.

Find out more about the complaint process.

You can also contact our office by email at InfoIPC@ipc.on.ca, or phone 416-326-3333, toll-free at 1-800-387-0073 if you have questions.