

City of Breckenridge

Request (to release) from an Individual

Explanation of your rights and permission to release

If you have a question about anything about this consent, or would like more explanation before you sign it, please contact:

Rena Smith
City Administrator
City of Breckenridge
420 Nebraska Ave
Breckenridge, MN 56520
E: rsmith@breckenridgemn.net
P: (218) 643-1431

To request data to be released as a data subject, you must show a valid state ID (such as a driver's license, military ID, or passport) as proof of identity.

Consent

I, _____, give my permission for the City of Breckenridge, Minnesota (City) to release data about me to _____ as described in this consent.

1. The specific data I want City to release include: _____

2. I understand that I have asked City to release the data and any statements based on the data.
3. I understand that although some of the data are classified as private at the City, the classification/treatment of the data at _____ may not be the same and is dependent on laws or policies that apply to _____

This permission to release expires _____.

Name (Printed)

Signature

Date