

# 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:

Lori Conway  
City Administrator  
City of Breckenridge  
420 Nebraska Ave  
Breckenridge, MN 56520  
E: lconway@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