



SEARCH REQUEST AND CONSENT FORM

(to obtain information about an enforcement action against an individual other than yourself)

Use this form to ask for information about an enforcement action against an individual made under the [Family Orders and Agreements Enforcement Assistance Act](#) (FOAEAA).

INSTRUCTIONS: Please type or print when you fill in the form.

1. The information you provide must be complete and accurate.¹
2. Consent of the individual you are enquiring about is always required unless you are applying on behalf of a) an organization that has an information-sharing agreement with the Department of Justice Canada (DoJ) to obtain information in the FOAEAA databank; or b) an investigative body listed in Annex II of the [Privacy Regulations](#).
3. If you are authorized by the laws of Canada or a province, to administer the estate of an individual and wish to obtain information about that individual, you must also provide us with the proof of such authorization (e.g. Power of Attorney, Certificate of Appointment of Estate Trustee, etc.).
4. Refer to the second page of this form for the individual to sign and provide consent.
5. Return the form duly completed and signed with other required documents to: Family Orders and Agreements Enforcement Assistance Unit, Department of Justice Canada, 284 Wellington Street, Ottawa, Ontario K1A 0H8.
6. If you are looking for information about an enforcement action against you, you must use the [search request form](#) or call 1-800-267-7777.

Information about you (the applicant)

Given name(s): _____	Surname: _____
If applicable, your title and the name of your organization/institution: _____	
Current address: (Post box number, Address, City, Province and Postal Code) _____	
Telephone (day): _____	

Information about the individual (against whom there is an enforcement action)

Given name(s): _____	Surname: _____
Current address: (Post box number, Address, City, Province and Postal Code) _____	
Date of birth: _____ (yyyy/mm/dd)	Justice Reference Number (if available): _____
Social Insurance Number: _____	Maintenance Enforcement Program (MEP) file number (if available): _____

What information are you requesting (please check all boxes that apply)

<input type="checkbox"/> Justice Reference Number (if available)	<input type="checkbox"/> Statement of Accounts (Payment history)
<input type="checkbox"/> Status of the file <input type="checkbox"/> Garnishment application <input type="checkbox"/> Licence denial application	<input type="checkbox"/> Outstanding balance <input type="checkbox"/> Periodic amount <input type="checkbox"/> Arrears owed
<input type="checkbox"/> Other, please specify _____	

For what purpose and use are you requesting this information? For example, to administer or enforce a law; for a lawful investigation; to administer an estate, etc. _____

¹ The information retained in the FOAEAA database reflects the information provided to the FOAEAA Unit in a [release of information](#), [interception](#) or [licence denial](#) application. The FOAEAA Unit is not responsible for any discrepancies with the information provided in this form.



If you are requesting the information to administer or enforce a law, or to carry out a lawful investigation, please also indicate:

a) the legislative or regulatory provision(s) you are administering, enforcing or conducting an investigation under: _____

b) the legislative or regulatory authority that allows you to collect this information: _____

How would you like the FOAEAA Unit to respond to your request?	<input type="checkbox"/> By mail	<input type="checkbox"/> By Phone
--	----------------------------------	-----------------------------------

_____ Your signature	_____ Date: (yyyy/mm/dd)
-------------------------	-----------------------------

Privacy Act Notice Statement

The Department of Justice Canada (DoJ) is committed to protecting the privacy of individuals, including safeguarding the personal information you provide on the Search Request and Consent Form. The personal information provided on this form is collected under the authority of the [Family Orders and Agreements Enforcement Assistance Act](#) (FOAEAA) and related regulations and is protected in accordance with the [Privacy Act](#). This information will be used to search within the [Family Orders and Agreements Enforcement Assistance Act Personal Information Bank JUS PPU 125](#) for the purpose of responding to your request for information concerning a FOAEAA application and for any other uses or disclosures in accordance with the [Privacy Act](#). We will be unable to process your search request unless all of the required personal information is provided. If you require clarification about this form, please contact 1-800-267-7777.

Under the [Privacy Act](#), you have the right to access your personal information held by the Family Orders and Agreements Enforcement Assistance Unit and to request corrections to it. Where correction is not possible, you have the right to request that a notation be attached to the information reflecting any correction requested but not made. If you require clarification about this [Privacy Act](#) Notice Statement, please contact our Access to Information and Privacy Office at ATIP-AIP@justice.gc.ca or by phone at 613-907-3700. Please note that you have the right to file a complaint to the Office of the Privacy Commissioner of Canada regarding our handling of your personal information. For more information, please visit the Office of the Privacy Commissioner's website at www.priv.gc.ca or contact the Office by phone at 1-800-281-1376.

CONSENT FOR USE AND DISCLOSURE OF PERSONAL INFORMATION (to be completed and signed by the individual whose information is being sought or by the individual authorized by the law of Canada or a province to administer the person's estate).

The individual, institution or organization (applicant) mentioned above is seeking personal information about you or the individual for whom you are authorised to administer the estate under Canadian or provincial laws. The FOAEAA Unit cannot disclose this information without your written consent. You are under no obligation to provide consent. If you agree that the FOAEAA Unit disclose this information to the applicant, please complete the section below.

Consent Statement

I, _____, hereby authorize the DoJ to disclose to the applicant noted above, personal information about me or the individual whose estate I am authorized to administer under Canadian or provincial laws that is contained in the FOAEAA databank. Only the information specifically requested in this application is to be disclosed to the applicant. The applicant may use this information only for the purposes indicated above. This consent expires 30 days following the date of my signature . _____

Given name(s) and Surname of consenting individual (please print) _____	_____ Signature	_____ Date (yyyy/mm/dd)
Given name(s) and Surname of witness (please print) _____	_____ Signature	_____ Date (yyyy/mm/dd)