## 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:

Sydney Wiertzema City Administrator City of Breckenridge 420 Nebraska Ave Breckenridge, MN 56520 E: swiertzema@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 p	permission to release expires
Name	(Printed)
Signat	ture
Date	