

Application for Destruction of Fingerprints and Photograph for Non-Convictions

Personal information on this form is collected under British Columbia's Freedom of Information and Protection of Privacy and will be used to respond to your request.

Mail to:
Criminal Records Section
Delta Police Department
4455 Clarence Taylor Crescent
Delta, BC V4K 3E1

This is to request that my fingerprints and photograph be destroyed. I acknowledge that I will be notified in writing at the address provided below when the application has been received and then again when the process has been completed. I also acknowledge that this request may not be granted as the Delta Police Department is not obliged to destroy lawfully obtained fingerprints and photographs.

| | | |
|---------------|-----------------------|-------------------------|
| Charge | Court Location | Final Court Date |
|---------------|-----------------------|-------------------------|

| | | |
|----------------|-------------------|-----------------------|
| Surname | First Name | Middle Name(s) |
|----------------|-------------------|-----------------------|

Current Mailing Address:

| | | | | |
|-----------------|---------------|-------------|-----------------|--------------------|
| Street # | Street | City | Province | Postal Code |
|-----------------|---------------|-------------|-----------------|--------------------|

| | |
|----------------------|-----------------------------|
| Date of Birth | Contact Phone Number |
|----------------------|-----------------------------|

Signature: _____

Date of request: _____

Any additional information you feel may be required:

Please attach a photocopy of your primary photo identification (Driver's License, BCID, Passport, etc)