

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
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Surname	First Name	Middle Name(s)
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Current Mailing Address:

Street #	Street	City	Province	Postal Code
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Date of Birth	Contact Phone Number
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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)