

ACCESS REQUEST FORM

Under the *Personal Information Protection and Electronic Documents Act* (PIPEDA), Hydro One has certain responsibilities to provide you with access to information in our possession that identifies you ("Personal Information") upon your request.

The purpose of this Access Request Form is for you to make a request to Hydro One to gain access to your Personal Information that is in Hydro One's possession ("Access Request"). If you are a Hydro One distribution customer seeking access to your Personal Information, please do not submit this Access Request Form – instead please contact Hydro One at 1-888-664-9376 or at CustomerMasterDataEnquiries@HydroOne.com, in order to obtain access to your Personal Information.

You will not be expected to provide additional Personal Information beyond what is asked for in this Form. Proof of identity will be required before the Personal Information will be supplied, and Hydro One will contact you at a later date to request proof of identity. If you have any questions or wish to contact Hydro One for more information, please refer to Hydro One's Privacy Code, or contact the Privacy Office at PrivacyOffice@HydroOne.com or 647-624-1523.

Requester Information (Complete all information)

Last Name _____ First Name _____

Request Date _____ Phone # _____

Address _____

City/Town _____ Postal Code _____

Email _____

ACCESS REQUEST

*Complete the fields shown on pages 1 to 3. *Indicates required fields.*

DISABILITY ACCOMMODATION (Please only use if you are requesting accommodation):

Hydro One is committed to ensuring that individuals with disabilities have equal access to, and can benefit from, all of its public-facing services. If you are requesting accommodation for a disability in our access to Personal Information process, your request should be made in writing below, unless you are unable to do so.

- When requesting accommodation for a disability in writing, please describe the nature of the accommodation requested and the rationale for the request in the space provided below.
- If providing the information in writing would limit your ability to make such a request, please contact the Privacy Office at PrivacyOffice@HydroOne.com or 647-624-1523. A Privacy Office Representative will assist you in making your request directly or refer you to the appropriate person.

Only use this space if you are requesting accommodation. Otherwise, please leave this space blank.

INFORMATION REQUESTED*

Please provide sufficient details to identify the Personal Information being requested i.e., subject matter, date range, type of records.

NOTE: if the space is inadequate please continue on the back of this form.

REASON FOR REQUEST

Please provide details on the reason for your Access Request. Providing this information may help us identify Personal Information that is relevant to your Access Request.

METHOD OF ACCESS PREFERRED (Please select one)*

- Receive paper copies of the Personal Information documents
- Receive electronic copies of the Personal Information documents

PREVIOUS INQUIRY

Is this Access Request related to a previous inquiry?

- Yes No

If available, please include the reference number from the previous inquiry here:

Please quote this reference number on all correspondence relating to the Access Request.

ACKNOWLEDGMENTS

In making this Access Request, I agree to provide:

1. Proof of my identity; and
2. Further information and supporting documents as may reasonably be required to process the Access Request.

I also acknowledge and agree that Hydro One may be legally obliged or allowed to refuse access to certain Personal Information.

ADDITIONAL INFORMATION

A Hydro One Privacy Office Representative will contact you by phone or email to confirm your identity and/or right to access the requested Personal Information.

- If we are able to provide you with access to the requested Personal Information, Hydro One will attempt to do so within 30 days of receipt of your completed Access Request Form. If we need more time to locate or gather your information, we will contact you.
- If we are unable to provide you with access to your Personal Information, we will provide you with a reason within 30 days of your Access Request.

Except with the consent of the Requester, the Personal Information provided in this Form will only be used for the purpose of processing this Access Request and will be retained until it is no longer necessary for legal or business purposes.

SIGNATURE

Date _____

Name (Print) _____

Signature _____

FOR OFFICIAL USE ONLY

Access Request managed by _____ Date _____

Requester identity verified by _____ Date _____

Access Request received by _____ Date _____

Filed by _____ Date _____

REMARKS _____

Request granted/declined by _____ Date _____

Reason _____ Date _____

Written access granted/denied issued by _____ Date _____

Filed by _____ Date _____

REMARKS _____