



Date: \_\_\_\_\_

Municipality of Chelsea  
100 Old Chelsea Road  
Chelsea, (Québec) J9B 1C1

**Subject: Access to documents request**

In accordance with article 9 of the Act respecting access to documents held by public bodies and the protection of personal information, I hereby request the following document(s):  
(Please indicate the name of document(s) requested)

- 1.
- 2.
- 3.
- 4.
- 5.

**Identification of applicant**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

**Consultation process**

\* Photocopies fees may apply

By mail :  By Email :  On site :

\_\_\_\_\_  
Signature of applicant