

**CITY OF LAUDERDALE
GENERAL AUTHORIZATION AND RELEASE
PURSUANT TO MINNESOTA STATUTES 13.05 SUBD. 4
MINNESOTA DATA PRACTICES ACT**

TO: St. Anthony Police Department
Minnesota Bureau of Criminal Apprehension

List agencies to contact if from other cities and or/states

I, _____, hereby authorize and grant my informed consent to permit you to release to and make available to the City of Lauderdale, Minnesota, and or/its agents and/or representatives any and all data classified as public or private that concerns me and that may be in your possession. The data that I authorize to be released consists of public or private data as defined by Minnesota Statute 13.02 that has been collected by you as a result of my contacts and associations with you and/or your representatives. The information for which release is authorized includes **ALL** data that has been collected, created, received, retained or disseminated in whatever form that in anyway relates to my dealings with you and your agency. I understand that the purpose of permitting the City of Lauderdale to have access to this information is to determine my suitability to obtain and possess a business license within the City of Lauderdale pursuant to provisions of City of Lauderdale Ordinances. I further understand that this information may subsequently be used for other purposes relating to my application for a business license within the City of Lauderdale, including verification of my records and information contained in the license application.

By signing this authorization, I release the Minnesota Bureau of Criminal Apprehension and any other entity listed above from any and all liability that may otherwise or does accrue as a result of this release of any and all data, regardless of accuracy. I also release the City of Lauderdale from any and all liability for its receipt and use of data pursuant to this consent.

This authorization shall be valid for a period of one year; however, I reserve the right to, at any time prior to that expiration, cancel the written authorization by providing written notice to the City of Lauderdale or to you of that fact.

A photocopy, fax or reproduction of this authorization and release in any form shall be granted the same authority as an original document.

Signature of Applicant

Date

Full Printed Name – First, Middle, Last

Date of Birth – Month, Day, Year

Subscribed and sworn to before me this _____ day of _____, 20____.

_____, Notary Public

Notary Seal:

RIGHTS OF SUBJECTS OF GOVERNMENT DATA
"TENNESSEN WARNING"

In accordance with the Minnesota Government Data Practices Act, the City of Lauderdale is required to inform you of your rights as they pertain to the information collected about you. Public information is data that is not classified by state statute, federal law or temporary classification as either private or confidential. It is accessible to anyone for any reason. All government data is presumed to be public unless a specific state or federal law classifies it otherwise. Private information is that information which is available to you, not the public. Confidential information is that information which is not available to you or the public. The information we collect from you is either public or private. The separation of that information is as follows:

PRIVATE – DRIVER’S LICENSE NUMBERS AND SOCIAL SECURITY NUMBERS

PUBLIC – ALL OTHER INFORMATION COLLECTED AT THE TIME OF APPLICATION

Your application includes a social security number which is classified as private data under the Minnesota Government Data Practices Act. Your social security number will be used to conduct a preliminary background and financial investigation pursuant to Lauderdale City Code Chapter 10, Section 3-10 and any applicable City Code. The information collected and required from you is to determine your eligibility for a City of Lauderdale regulatory license. If you do not supply the required information, the City of Lauderdale will not be able to determine your eligibility.

The dissemination and use of the private data we collect is limited to that necessary for the administration and management of regulatory licenses. Persons or agencies with whom this information may be shared include:

CITY AND COUNTY PERSONNEL INVOLVED IN DETERMINING YOUR ELIGIBILITY, CITY COUNCIL MEMBERS TO APPROVE THE APPLICATION, CONTRACTED PUBLIC AUDITORS, AND THOSE INDIVIDUALS TO WHOM YOU GIVE YOUR EXPRESS WRITTEN PERMISSION.

Unless otherwise authorized by state statute or federal law, other government agencies utilizing the reported private data must also treat the information private.

You may wish to exercise your rights as contained in the Minnesota Government Data Practices Act. These rights include:

THE RIGHT TO SEE AND OBTAIN COPIES OF THE DATA MAINTAINED ON YOU.

THE RIGHT TO BE TOLD THE CONTENTS AND MEANING OF THE DATA.

THE RIGHT TO CONTEST THE ACCURACY AND COMPLETENESS OF THE DATA.

To exercise these rights, contact the City Administrator’s office, 1891 Walnut Street, Lauderdale, MN 55113.

I HAVE READ AND UNDERSTAND THE ABOVE INFORMATION REGARDING MY RIGHTS AS A SUBJECT OF GOVERNMENT DATA.

Signature of Data Subject

Date

10/14/2015