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Authorized signature, applicant

Job Title

Date

Please send this completed form to Communications Services, Haldimand-Norfolk Health and Social Services,
12 Gilbertson Dr., P.O. Box 247, Simcoe ON N3Y 4L1, or fax 519-426-9974.

Request granted Request denied Request granted with these conditions

Signature, Haldimand-Norfolk Health and Social Services

Job Title

Date