



BC Centre for Disease Control
Provincial Health Services Authority

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Release of Consumer Card Information Consent Form

In order to assist BC Centre for Disease Control and one or more of the provincial health authorities, and possibly the Canadian Food Inspection Agency, in the investigation of an outbreak of foodborne illness, I, _____ (print name) consent to the release of my food purchase information to the BC Centre for Disease Control and its health partners for the purposes of a foodborne outbreak investigation.

Store name*: _____

*If consumer cards for more than one retailer were used, please complete a separate consent form for each retailer.

Store location(s): _____
e.g., 12th and Maple, Vancouver

Card number: _____

Home address: _____

Unit #	Street #	Street name	City	Postal code

Phone number: _____

Signature: _____ Date: _____

BC Centre for Disease Control is collecting your personal information under the authority of sections 26 (c) and (e) of the BC [Freedom of Information and Protection of Privacy Act](#) (FIPPA). The information you provide to us will only be used for the purposes we have outlined in this form. Questions regarding the collection of your personal information or requests for records may be directed to the Information Access Privacy office that supports the BC Centre for Disease Control at privacy@phsa.ca or 604-707-5833.

For health officers only:

Based on the onset, incubation period and expected shelf-life of the implicated product, provide approximate dates of purchase of interest: From _____ to _____ Unknown
 YYYY-MM-DD YYYY-MM-DD



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