

## Blanket Access Authorization Letter

[A department may use this sample letter to give a researcher full access to the department's restricted archival records that are controlled by Library and Archives Canada (LAC). The department must prepare and sign this letter on the department's official letterhead, or send the text by email. The person signing or emailing the letter must be at a director level or higher.]

[Use this address if printing on letterhead.]

Director, ATIP and Litigation Response  
Library and Archives Canada  
395 Wellington St.  
Ottawa ON K1A 0N4

[Use this address if emailing. LAC will not accept emails sent on behalf of the undersigned.]

To: bac.dairp-atipd.lac@canada.ca

[Message body]

**Subject: Authorization Letter - Departmental Researcher Access to Restricted Archival Records**

Dear Director of ATIP and Litigation Response:

This letter gives Departmental Researcher status to the following researcher(s) needing full access to restricted archival government records created by my department under the control of Library and Archives Canada (LAC).

**Access:**

Record group:	RG XX or RXX
Access type:	Blanket
Expiration:	June 01, 2020 – June 01, 2021 ( <i>maximum of one year</i> )
Permission to make copies:	YES/NO

**Researcher(s):**

Name of the researcher:	Jane Smith
Security clearance:	RELIABILITY
LAC user card number:	2328600XXXXXX
Business telephone number:	613-999-1234
Business email:	<a href="mailto:jane.smith@canada.ca">jane.smith@canada.ca</a>

Name of the researcher:	John Smith
Security clearance:	SECRET
LAC user card number:	2328600XXXXXX
Business telephone number:	613-999-1235

Business email:

[john.smith@canada.ca](mailto:john.smith@canada.ca)

The researcher understands that the restricted archival records listed above are subject to the [Access to Information Act](#) and the [Privacy Act](#). Information must be protected in accordance with the Government of Canada's [Policy on Government Security](#). I accept that it is my organization's responsibility to ensure the researcher(s) named above understand and comply with these requirements.

You may contact [name and title of contact person](#) at [613-999-1234](#) or by email at [myemail@canada.ca](#) if you require more information about this authorization letter.

Sincerely,

[Name of director or person at a higher level](#)

Director, [Name of the Branch](#)  
Department / Government of Canada  
email address / Tel: [613-999-1234](#)

Directeur, [Direction ministérielle](#)  
Ministère / Gouvernement du Canada  
adresse courriel / Tél. : [613-999-1234](#)