

FORM 1

Reference No:
(For Internal Use Only)

THE ACCESS TO INFORMATION ACT, 2002
APPLICATION FORM FOR ACCESS TO OFFICIAL DOCUMENT
(Please use a separate application form for each document requested)

1. Title of Public Authority:
(Please state the title of the public authority from which you are requesting document)

2. Name of Applicant:
(Print)
Last First Middle

3. Address:
(Please indicate the address to which correspondence related to your application should be sent)
Mailing Business
.....
.....
Tel: Tel:
Fax: Fax:
Email:
Other:
.....

4. Description of Document:
(Please state all information available to you which will assist us in filling your request quickly)
Name/Type of Document (if known)
Reference/File No. (if known)
Other
.....
.....
.....

5. I would like to:
(Please check the relevant box(es))

☐ inspect the document
☐ listen to the document
☐ view the document
☐ have a copy(ies) of the document made available to me in the following format:
 ☐ photocopy
 ☐ compact disk
 ☐ diskette
 ☐ transcript
 ☐ other (please specify)
Number of copies required:

Please note that:
- payment will be required before copies are made;
- information on available formats and prices per copy may be obtained from the relevant public authority;
- where the provision of copies in the requested format is not possible, an alternative format, as may be agreed between the parties, will be made available.

.....
Signature of Applicant Date

Note: Responsible Officers should complete a Memorandum of Attestation and Verification if an Application is completed by him/her on behalf of the Applicant