



Freedom of Information

Form for requesting access to documents held by Council via the *Freedom of Information Act 1982*

Applicant details

Name _____

Address _____

Phone _____ Mobile _____

Email _____

Form of access

I request access by viewing the documents in person
(Fees applicable for printing & staff attendance)

☐ Yes

or

I request access to copies of the documents

☐ Yes

Section 25: Deletion of exempt matter or irrelevant material

Where part of a document is exempt from release or is irrelevant to the request, I agree to receive access to redacted documents where section 25 of the *Freedom of Information Act 1982* applies, in order to receive the part of the document that can be released

☐ Yes

☐ No

Duplicate documents

Where duplicates of the same document are discovered in Council's records, I request access to each duplicated copy of the document

☐ Yes

☐ No



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Request details (If there is insufficient space here, please attach a page to this form that specifies the documents you are requesting.)

Signature _____

Date _____



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Application fee and access charges

An application fee of \$33.60 is payable in accordance with Section 17(2A) of the *Freedom of Information Act 1982*. Payment is accepted by direct transfer of funds, credit card, cheque, money order or by cash (credit card and cash payments only for requests made in person at one of Council's Town Halls). In accordance with Section 17(2B) of the *Freedom of Information Act 1982*, you may request for the application fee to be reduced or waived. If you apply for the application fee to be reduced or waived please supply evidence that payment would cause you hardship.

Please note that your request may incur access charges in accordance with the *Freedom of Information (Access Charges) Regulations 2004*. You will be supplied with a statement of any applicable charges as your request progresses.

Payment details

☐ I enclose a cheque / money order for \$33.60 (made payable to City of Port Phillip)

or

☐ Please provide Council's banking details to enable a direct transfer of funds

or

☐ I hold a valid DVA Gold Card, Senior Health Care Card, Health Care Card or Pension Concession Card (or other documentation that gives evidence that payment of the application fee would cause hardship) and request that the application fee be reduced/waived in accordance with Section 17(2B) of the *Freedom of Information Act 1982*. A photocopy of the relevant card is attached.

Your personal information

The personal information requested on this form is being collected by the Council for the purpose of processing your Freedom of Information request. The personal information will be used solely by the Council for this primary purpose or for directly related purposes. Any credit card details provided for payment of the Freedom of Information application fee or for access charges will be destroyed immediately after the payment is processed. You may apply to the Council for access to and/or amendment of any of your personal information that is held by Council by contacting Council's Freedom of Information or Privacy Officer.

Office Use Only:

GL 10-0-1550-1001-40212