



## **APPLICATION FOR ACCESS TO DOCUMENTS**

Freedom of Information Act 1992

Please refer to the Shire's Information Statement (published in accordance with the *Freedom of Information* Act 1992) before completing this form.

DETAILS OF APPLICANT			
Surname: Given Names:	:		
Postal Address:			
Phone: Email:			
Organisation Name (if application is on behalf of an organisation):			
DETAILS OF REQUEST			
I am applying for access to document(s) concerning matters whic	h are: Personal:	or Non-Personal	
Detail of document(s) requested:			
		_	
FORM OF ACCESS (Tiple which are a in a proposition)			
FORM OF ACCESS (Tick whichever is appropriate)			
I wish to inspect the document(s)	Yes	No	
I require a copy of the document(s)	Yes	No	
I require access in another form	Yes	No	
Specify form required:			



## FREEDOM OF INFORMATION APPLICATION FORM

## **FEES AND CHARGES**

Attached is a cheque/cash to the amount \$30.00 to cover the application for	ee; Ye	es
Or		
I require an invoice to be issued for the application fee:	Yes	No
I understand that before I obtain access to documents, I may be required to respect of this application and that I will be supplied with a statement of ch		•
NOTE: In certain, cases, a reduction in charges may apply. If you consider reduction, submit a request with copies of supporting documents with this is	-	tled to a
No reduction to the application fee shall apply.		
I am requesting a reduction in charges:	Yes	No
ACKNOWLEDGEMENTS		
I have read the Information Statement:	Yes	No
I acknowledge that schedule 1 of the Freedom of Information Act 1992		
provides for matter that is "exempt" from disclosure:	Yes	No
APPLICANTS SIGNATURE:		
All Correspondence to:		
The Chief Executive Officer		
PO Box 4 Boddington WA 6390		
T: (08) 9883 4999 Email: shire@boddington.wa.gov.au		