

									Code				

									Code				

[illegible][illegible][illegible]

2. PARTICULARS OF RECORDED REQUESTED

If the provided space is inadequate, please continue on a separate page and attach it to this form. All additional pages must be signed.

[illegible]

3. TYPE OF RECORD

☐ Record is in written or printed form

☐ Record consists of recorded words or information which can be reproduced in sound

☐ Record is held on a computer or in an electronic, or machine-readable form

4. FORM OF ACCESS

(Mark the applicable box with an "X")

- | | |
|--|---|
| ☐ Printed copy of record (including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form) | |
| ☐ Written or printed transcription of virtual images (this includes photographs, slides, video recordings, computer-generated images, sketches, etc) | |
| ☐ Transcription of soundtrack (written or printed document) | ☐ Copy of record on flash drive (including virtual images and soundtracks) |
| ☐ Copy of record on compact disc drive (including virtual images and soundtracks) | ☐ Copy of record saved on cloud storage server |

5. MANNER OF ACCESS

(Mark the applicable box with an "X")

- | | |
|---|---|
| ☐ Personal inspection of record at registered address of public/private body (including listening to recorded words, information which can be reproduced in sound, or information held on computer or in an electronic or machine-readable form) | |
| ☐ Postal services to postal address | ☐ Postal services to street address |
| ☐ Courier service to street address | ☐ Facsimile of information in written or printed format (including transcriptions) |
| ☐ E-mail of information (including soundtracks if possible) | ☐ Cloud share/file transfer |
| ☐ Preferred language (Note that if the record is not available in the language you prefer, access may be granted in the language in which the record is available) | |

6. PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED

If the provided space is inadequate, please continue on a separate page and attach it to this form. The requester must sign all the additional pages.

Indicate which right is to be exercised or protected:

Explain why the record requested is required for the exercise or protection of the aforementioned right:

7. FEES

- a) A request fee must be paid before the request will be considered.
- b) You will be notified of the amount of the access fee to be paid.
- c) The fee payable for access to a record depends on the form in which access is required and the reasonable time required to search for and prepare a record.
- d) If you qualify for exemption of the payment of any fee, please state the reason for exemption.

Reason:

You will be notified in writing whether your request has been approved or denied, as well as the costs of approved requests if any. Please indicate your preferred manner of correspondence below.

Manner of correspondence:

☐ Personal collection ☐ Postal address ☐ Electronic communication

If electronic communication was selected, please provide your email address:

Signed at:

Signature of Requester/person on whose behalf request is made

Date

D

D

M

M

Y

Y

Y

Y

FOR OFFICIAL USE

Reference number:

Request received by: (State rank, name and surname of Information Officer)

Rank:

First name(s):

Surname:

Date received:

D

D

M

M

Y

Y

Y

Y

Access fees:

Deposit (if any):

Signature of Information Officer

Date

D

D

M

M

Y

Y

Y

Y