

Informal Access Application  
 Government Information (Public Access) Act 2009 (Section 8)  
 City Performance

Applicant			
Surname			
Given Name			
Address			
Suburb		Postcode	
Phone/Mobile Phone			
Email Address			

I agree to receive correspondence at the above email address

In processing your application, it may be necessary to consult with other parties. If you object to the disclosure of your name as the applicant, please indicate by ticking the box

**Important Information**

Please complete this form if you are requesting access to information as provided for under section 8 of the Government Information (Public Access) Act 2009 (GIPA Act). Government information is information contained in a record held by Council. If you need help in filling out this form or require further information, please contact Council's Information Officer on (02) 4429 3111 or visit our website [www.shoalhaven.nsw.gov.au](http://www.shoalhaven.nsw.gov.au)

**Please note:** In accordance with S8 of GIPPA Act council cannot be required to disclose information pursuant to an informal request and cannot be required to consider an information request. Council can impose reasonable conditions with respect to the release of information and can decide by what means the information is to be released. Public access to a record may be facilitated by deleting any information if the inclusion of that information would otherwise result in there being an overriding public interest against disclosure of the record.

**Details of Request**

Please describe the information you would like to access in enough detail to allow us to identify it.

Are you seeking personal information Yes  No


**Proof of Identity**

(Only required when an applicant is seeking to access their own personal information).  
 When seeking access to personal information, you must provide proof of identity in the form of an original or a certified copy of any one of the following documents

Australian Drivers Licence (with photograph signature & current address)      Current Australian Passport      Other proof of signature and current address details

Applicant's Signature		Date	
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**Privacy Notification:** The information on this form is being collected by Shoalhaven City Council and supports your request for access to personal information from a public register. The declaration will be used by Council staff for the purpose of determining your request. The provision of this information is voluntary however, without it Council may not be able to process your request. You may apply to Council for access to this information at any time.

Office Use Only		
Related Policies:	POL16/196 – Public Access to Council Information	
TRIM Form Number	FM11/227 (Form 747)	
Owned by (Department):	City Performance	

**Property Owners Consent**

*If you are seeking access to property files (eg Building & Development files), and you are not the owner of the property, it will expedite your application if the current owners consent is provided at application stage.*

Name of Owner

Address

Suburb

Postcode

Phone/Mobile Phone

Email Address

I hereby consent to Council (tick one)

Allowing the applicant to inspect the documents requested in this application

Allowing the application to both inspect and take copies of any documents requested in this application

Owner's Signature

Date

**Form of Access**

How do you wish to access the information

Inspect the document/s

A copy of the document/s

Access in another way (please specify)

**Copying Charges**

I understand I may be required to pay a copying charge for any documents take away