SCHEDULE (Regulations 8, 17 and 19)

Form 1 (Regulation 8 (1) and (2))

Reference No.

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:
2.	Name of Applicant: (<i>Print</i>).
	LastMiddle
3.	Address: (Please indicate the address to which correspondence related to your application should be sent).
	Mailing Business
	Tel: Fax: Tel: Fax:
	EmailOther
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

□ nave a	copy(les) of the document made available to me in the following format:
	photocopy compact disc diskette transcript
	other (please specify)
Nu	mber of copies required :
Please not	e 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. 	
	Dateof Applicant

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