

**CITY OF KALGOORLIE-BOULDER APPLICATION FOR ACCESS TO DOCUMENTS**

*(Under Freedom of Information Act 1992, S.12)*

| APPLICANT DETAILS   |   |                    |                               |           |  |
|---|---|--------------------|-------------------------------|-----------|--|
| <b>SURNAME:</b>   |   | <b>GIVEN NAME:</b> |                               |           |  |
| <b>AU POSTAL ADDRESS:</b>   |   | <b>POSTCODE:</b>   |                               |           |  |
| <b>TELEPHONE NUMBERS:</b>   |   | <b>MOBILE:</b>     |                               |           |  |
| <b>EMAIL ADDRESS:</b>   |   |                    |                               |           |  |
| DETAILS OF REQUEST  |   |                    |                               |           |  |
| <b>SCOPE OF REQUEST</b>   |   |                    |                               |           |  |
| I am applying for access to documents concerning -  |   |                    |                               |           |  |
| <i>Please indicate</i>  | <b>Personal Documents</b>                                 |                    | <b>Non-personal Documents</b> |           |  |
| <b>Please provide details</b>   |   |                    |                               |           |  |
| FORMS OF ACCESS   |   |                    | <b>Yes</b>                    | <b>No</b> |  |
| <i>Please indicate</i>  | I wish to inspect the document(s)                         |                    |                               |           |  |
|   | I require a copy of the document(s)                       |                    |                               |           |  |
|   | I require access in another form ( if Yes please specify) |                    |                               |           |  |
| <i>Please specify</i>   |   |                    |                               |           |  |
| FEES & CHARGES  |   |                    |                               |           |  |
| <i>I understand that before I obtain access to documents I may be required to pay processing charges in respect of this application and that I will be supplied with a statement of charges if appropriate.</i>   |   |                    |                               |           |  |
| Lodgment fee (no fee is applicable if for personal information about the applicant)   |   |                    | <b>\$30</b>                   |           |  |
| for every hour/pro-rata thereafter  |   |                    | <b>\$30</b>                   |           |  |
| photocopying/page   |   |                    | <b>.20c</b>                   |           |  |
| <i>In certain cases a reduction in fees and charges may apply - see section on fees and charges in the Information Statement. If you consider you are entitled to a reduction, submit a request with copies of documents, which address the criteria on the back of this form and support your application for a fee reduction.</i> |   |                    |                               |           |  |
|   | I am requesting a reduction in fees and charges           |                    |                               |           |  |

|  |  |                     |  |
|--|--|---------------------|--|
| <b>APPLICANT SIGNATURE</b>   |  |                     |  |
|  |  | <b>Date:</b>        |  |
| <p><i>For further information regarding the FOI process &amp; procedures please<br/>follow this link to the Information Statement <a href="#">[here]</a></i></p> |  |                     |  |
| <b>Office use only</b>   |  |                     |  |
| <b>Received On:</b>  |  | <b>Proof of ID:</b> |  |
| <b>FOI Reference #:</b>  |  | <b>Due Date:</b>    |  |