

Complete this form to apply for access to information held by the Department of Justice under the *Government Information (Public Access) Act 2009* (GIPA Act). If you need help completing this form, contact the Open Government, Information and Privacy Unit on 02 8346 1359.

| APPLICANT DETAILS | | | | | | |
|---|--|--|--------------------|---|------------------------------|-----------------------------|
| Type of Applicant <i>select from the following</i> | | | | | | |
| <input type="checkbox"/> Member of the Public | | <input type="checkbox"/> Legal Representative | | <input type="checkbox"/> Private Sector | | |
| <input type="checkbox"/> Member of Parliament | | <input type="checkbox"/> Media Representative | | | | |
| Applicant Details | | | | | | |
| Title | | Family Name | | Given Names | | |
| Previous Names <i>for members of the public only where applicable</i> | | | | | | |
| Title | | Family Name | | Given Names | | |
| Corrective Services MIN: <i>If an offender</i> | | | | | Date of Birth | |
| | | | | | | |
| Company Name | | | | | ABN | |
| | | | | | | |
| Postal Address | | | | | | |
| | | | State | | Postcode | |
| Contact No | | | | | | |
| | | | | | | |
| Email Address | | | | | | |
| | | | | | | |
| I agree to receive all correspondence related to this application at the above email address | | | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Proof of Identity | | | | | | |
| <p>When seeking access to your own personal information, an applicant must provide proof of identity in the form of a *certified copy* of one of the following documents (i.e. signed and dated) by an authorised witness (Justice of the Peace, Doctor, Pharmacist, Legal Practitioner, Postmaster – Australia Post). See website: https://www.ag.gov.au/Publications/Statutory-declarations/Pages/List-of-authorised-witnesses.aspx</p> <p>Please attach a certified copy of identification to application.</p> | | | | | | |
| <input type="checkbox"/> Australian Drivers Licence | | <input type="checkbox"/> Current Australian Passport | | <input type="checkbox"/> Other proof of signature and current address details | | |
| AUTHORISING A PERSON / AGENCY TO ACT ON YOUR BEHALF | | | | | | |
| Attach a separate authority or Complete this section ONLY if you are acting on behalf of another person | | | | | | |
| Name of person/agency | | | Given Names | | | |
| | | | | | | |
| Company Name | | | | | | |
| | | | | | | |
| Postal Address | | | | | | |
| | | | State | | Postcode | |
| Signature | | | | | | |

APPLICATION FEE

I attach payment of the \$30.00 application fee by way of:

EFT Transfer

Cheque / Money Order*

Bank Account: Department of Justice Operating Account
BSB: 032001 **Account number:** 201716

If paying by EFT you must attach proof of payment to this application

PROCESSING CHARGES

You may be asked to pay a charge for processing the application (\$30 per hour). We will contact you if you need to pay

Processing Fee Reduction

Some applicants may be entitled to a reduction in their processing charges. If you wish to apply for a discount, please indicate the reason.

Financial hardship – please attach supporting documentation e.g. Health Card, Pension or Centrelink card)

Special benefit to the public

Please specify reason

*Cheques/Money orders are to be made payable to the **Department of Justice**

GOVERNMENT INFORMATION

Are you seeking access to your own personal information only?

Yes

No

Does your application include a request for the personal information of other persons?

Yes

No

If NO is selected, we will remove any third party personal information from the records

Please describe in detail the information you would like to access to allow the record(s) to be identified.

Date range (if applicable) for the records: From DD/MM/YYYY to DD/MM/YYYY

Please provide sufficient details of the information you would like to access to enable us to identify it (attach additional pages if necessary). Note if you do not provide sufficient information your application may be deemed invalid.

Please be as precise as possible. If you do not give enough information about the information you are seeking we may not be able to find it. You can only apply for access to information that is already held by the agency. Attach to this application any additional information or documentation that you feel will support your claim for access to the requested documents/information.

CONSULTATION

The agency may be required to consult with third parties before deciding the application. For the purposes of consultation, please indicate if the agency can disclose the following information about you to third parties:

Your name and/or company name

Yes

No

Your reason for making this application

Yes

No

DISCLOSURE LOG

If the information sought is released to you and would be of interest to other members of the public, details about your application (excluding your personal information) may be recorded in the agency's 'disclosure log'. This is published on the agency's website.

Do you object to information released being included in the Disclosure Log?

Yes

No

If you do object, please tell us WHY?

PRIVACY STATEMENT

The Department of Justice is subject to the *Privacy and Personal Information Protection Act 1998* and the *Health Records and Information Privacy Act 2002*.

Your personal information is being collected to process your application for information pursuant to Part 4, Division 1 of the *Government Information (Public Access) Act 2009*. The provision of personal information is voluntary, however if you do not provide it we may not be able to process your application. The Department of Justice may use your personal information for the purposes of processing your application within the agency. The Department of Justice will not disclose your personal information without your consent unless authorised by law. Your personal information will be held by the Department of Justice.

Generally you have the right to access and correct the information if you believe that it is incorrect. If you wish to do so, please contact the Privacy Officer by email at infoandprivacy@justice.nsw.gov.au or call 028346-1526.

Applicant's Signature

Date

Applications can be lodged using the following methods:

POST

Department of Justice
Open Government Information and Privacy Unit
GPO Box 6
Sydney NSW 2000

EMAIL

infoandprivacy@justice.nsw.gov.au
Proof of a completed EFT funds transfer must accompany any emailed application