

## INFORMAL ACCESS REQUEST FORM

[Section 18 Government Information (Public Access) Act 2009 & Schedule 5 - Government Information (Public Access) Regulation 2009]

THIS FORM IS TO BE USED FOR ACCESS AND/OR DISCLOSURE OF DOCUMENTS HELD BY THE COUNCIL WITHIN FILES OR STORED ELECTRONICALLY ON COUNCIL'S RECORDS MANAGEMENT SYSTEM

Council contact details: Ph 6392 3200; email council@cabonne.nsw.gov.au; fax 6392 3260 or PO Box 17 Molong NSW 2866 **APPLICANT'S DETAILS** Postal Address..... Postcode Telephone Number (H)......(W) .....(M).... Fax Number..... Email IS THE INFORMATION ABOUT YOUR PERSONAL INFORMATION? YES / NO I REQUIRE ACCESS TO THE FOLLOWING INFORMATION: IF THE INFORMATION IS ABOUT PROPERTY: PROPERTY DETAILS Street Address ...... Lot No ......DP or SP No ...... Application No ...... Description of development..... **COPYING CHARGES** Copy charges apply in accordance with Council's adopted fees and charges. **DOCUMENT INSPECTION / DELIVERY DETAILS** Inspect at Molong / Cudal / Canowindra Council office only Circle one item. OR Forward by Mail / Fax / Email (Circle one item). OWNER'S OR ARCHITECT'S CONSENT IS REQUIRED FOR REQUESTS FOR COPIES OF (DEVELOPMENT & BUILDING APPLICATION & CONSTRUCTION CERTIFICATE) PLANS & ALSO FOR COPIES OF BUILDING CERTIFICATES Owner's or Architect's Name ..... PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE Purpose of collection: Public access to Council's documents. Intended recipients: Council staff and is publicly available under the Government Information Public Access Act 2009. Supply: Voluntary, a consequence of non provision is that insufficient information will be provided. Access / Correction: Requests for access / correction of information under the Government Information (Public Access) Act or Privacy & Personal Information Protection Act 1998, contact the Council's Public Access Coordinator. Storage: This form will be placed on a relevant file and/or will be saved on Council's main records management database when the request has been processed and the enquiry is completed. **OFFICE USE ONLY** Request received by...... Location (Canowindra, Cudal, Molong) Date...... (name) (Circle one) Referred to........Department.......Date...... 

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