



REQUEST FOR INFORMATION FORM

1. PARTICULARS OF PERSON REQUESTING ACCESS TO INFORMATION

Full Names & Surname: _____
Identification Number: _____
Telephone Number: _____
Fax Number: _____
E-Mail Address: _____
Postal Address: _____
_____ Code: _____

2. PARTICULARS OF PERSON ON WHOSE BEHALF THE REQUEST IS MADE

Only complete this section if a request for information is made on behalf of another person.

Full Names & Surname: _____
Identification / Company Number: _____

3. PARTICULARS OF REQUESTED INFORMATION

Provide full particulars of the information to which access is requested. If the provided space is not sufficient, please continue on a separate page and attach it to this form. Any additional pages submitted must be signed.



4. FORMAT IN WHICH INFORMATION IS REQUESTED

Indicate the format in which the information is requested. Please note that the request for access in the specified format may depend on the format in which the record is available and access in the requested format may be refused under certain circumstances.

5. RIGHT TO BE EXERCISED OR PROTECTED

State what right is to be exercised and/or protected and why the information is required to protect and/or to exercise this right.

6. NOTICE OF APPROVAL / REJECTION OF REQUEST

You will be notified via e-mail and/or post whether your request has been approved or denied. If you wish to be informed in another manner, please specify the manner and provide the necessary details:

Signed at: _____ on this _____ day of _____ 20_____

Signature of person submitting the request