

RIGHT TO INFORMATION ACT 2009 - APPLICATION FOR ASSESSED DISCLOSURE

www.derwentvalley.tas.gov.au
(03) 6261 8500

P.O. Box 595
New Norfolk TAS 7140

APPLICANT'S DETAILS

Name: _____ Title: _____

Postal Address: _____

Daytime contact information:

Work _____ Home _____ Mobile _____

Email: _____

PUBLIC AUTHORITY OR MINISTER APPLIED TO:

GENERAL TOPIC OF INFORMATION APPLIED FOR:

(one sentence summary of information requested)

DESCRIPTION OF EFFORTS MADE PRIOR TO THIS APPLICATION TO OBTAIN THIS INFORMATION:

Application fee included: (please tick) ☐ Yes ☐ No

OR

Application for fee waiver (please tick)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Member of Parliament acting in connection with his or her official duties	Impecunious Applicant (experiencing financial hardship)	General public interest or benefit (you will be required to demonstrate that you intend to use the information for this purpose)	Journalist acting in connection with his or her professional duties

If application for personal information, proof of identity provided (please tick) ☐ Yes ☐ No

DETAILS OF THE INFORMATION SOUGHT

(If there is insufficient room below, please attach further details:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Applicant's Signature

Date _____

Requests for or changes to personal information require proof of identity to be attached or provided.

**PLEASE RETURN SIGNED AND COMPLETED FORM AND FEE (IF PAYABLE) TO
DERWENT VALLEY COUNCIL**

IN PERSON

Council Chambers
Circle Street
NEW NORFOLK

MAIL

Delegated Right to Information Officer
Derwent Valley Council
PO Box 595
NEW NORFOLK, TAS 7140

EMAIL

dvccouncil@dvc.tas.gov.au