



REQUEST FOR KATHERINE TOWN COUNCIL INFORMATION

Under the *Information Act (NT) 2002*

APPLICANT DETAILS

Preferred title: Mr/Mrs/Miss/Ms/Other

Surname: _____ First Name(s): _____

Address for correspondence: _____

Email Address: _____

Contact numbers: A/H _____ Mobile: _____

B/H: _____ Fax: _____

Preferred method of contact: Telephone Facsimile Email Mail

Privacy: The *Information Act* requires you to supply your name and an address for correspondence. Additional contact details will assist the Darwin City Council to deal with your application. Personal information supplied in the course of an application may be used or disclosed in order to deal with the application and any review or complaint arising from the application.

INFORMATION SOUGHT

Please provide as much detail as you can about the type of information you want, eg. dates, location, subject matter, who was involved. If insufficient space please attach a separate sheet of paper.

Please tick: I want to inspect the document(s) I want a copy of the document(s)

ARE YOU MAKING THIS REQUEST ON BEHALF OF AN ORGANISATION? Yes No

Name of organization/business: - _____

Your position/office in the organisation: _____

FEES AND CHARGE

Attached is a cheque/money order/cash (please circle) to the amount of \$30 to cover the application fee. **Please do not send cash through the mail.** If a processing fee is required, you may be asked to pay a deposit of \$25 if the processing fee is estimated to be \$100 or less, or 50% of the estimate if the processing fee is estimated to be more than \$100. Application can be made to waive/reduce fees.

DECLARATION

I understand that before I obtain access to information I may be required to pay processing fees equal to the total cost of the services and material that are provided in response to this application and that I will be supplied with a statement of charges if appropriate. I certify that the information supplied by me concerning this application is complete and true to the best of my knowledge.

Signature: _____ Date: _____

NOTES FOR KATHERINE TOWN COUNCIL INFORMATION FORM

1. Identification

You will be asked to show identification when lodging this application. If posting your application, please attach a photocopy of your driver's licence, passport or another form of approved identification documentation. This is to ensure that the Council is satisfied as to your identity.

2. Where to lodge this application

This application can be lodged at the Civic Centre, Stuart Highway, Katherine or posted to the Information Officer, Katherine Town Council, PO Box 1071 KATHERINE, NT, 0851

3. Processing your application

- The Council will respond in writing to your request within 30 days of receiving your application
- Should it be necessary to view records you will be contacted regarding a suitable time and venue.
- If aggrieved by the decision, you may apply for an internal review to which the Council has 30 days to respond. If unsatisfied with the review outcome you may lodge a complaint with the Information Commissioner within 90 days (s.106 (3) (a) of the Act).

4. Decisions in relation to applications

The response to this application could inform you that the Council will:

- provide access in whole or part
- provide edited copies of the information
- defer access
- refuse access because the information is exempt under the Act
- refuse access because providing access would unreasonably interfere with the operations of the Council; and
- require more time to make a decision.

(Refer to sections 21-30 of The Act)

Exemptions:

The Council is not required to provide access to information classified as exempt under the Act. These exemptions are:

1. Part 4, Division 2 sections 45-49

- Executive Council, Cabinet, Territory economy
- Information that would prejudice security or law enforcement
- Information that is exempt under corresponding FOI laws
- Information subject to a secrecy provision; and
- Information that would prejudice the preservation of our system of justice

2. Part 4, Division 3 sections 50-58

- Particular case matters where disclosure may not be in the public interest.

ASSISTANCE

If you need help to complete this application form please contact the Administration Manager, Katherine Town Council, PO Box 1071 Katherine NT 0851, Phone: (08) 8972 5500, Facsimile: (08) 8971 0305 or Email: records@ktc.nt.gov.au.

Further information about the Information Act can be found at www.ktc.nt.gov.au

OFFICE USE ONLY

Receipt No. _____ Reference No. _____

Application Receipt Date _____

Satisfied as to Identity of Applicant: Yes / No (*please circle*)

Receiving Officer's Name: (*please print*) _____

Signature of Receiving Officer: _____