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<b>APPLICAN</b>	NT							
Title	Given Na	ame/s					Family Name	
Organisation	n							
Postal Addr	ess							Postcode
Daytime tele	ephone	Facsimile	_	Email <i>A</i>	Address			
If you are a	cting on so	meone's behalf pleas	se pi	rovide <sup>·</sup>	that person's	:		
Given Name	e/s				Family Nam	е		
	or example:	a client agreement i					alf, such as legal docume ritten authorisation from t	ntation in support of your he person concerned.
Only require	ed when ar	n applicant is request	ing i	informa	ation on their	01	wn behalf.	
		to personal informati following documents		an app	licant must p	ro	ovide proof of identity in the	ne form of a certified
□Austra	alian driver'	s licence (with photo	grap	oh, sign	nature and cu	rr	rent address)	
□Currer	nt Australia	n Passport	□Ot	ther pro	oof of signatu	re	e and current address	
GOVERN	IMENT IN	FORMATION						
Building & D	Developme do not give	nt Records, Address	, Lot	t/Section	on/DP.		detail to allow us to ident	
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	•••••				•••••			
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Third Party Cons	ersonal information ? ultation – Council may ne d. Do you object to your na	ed to consult with oth			of the information that			
$\square$ No, I have no objection to the release of my name $\square$ Yes, I object to the release of my name								
FORM OF ACC	ESS							
How do you wish	to access the information?							
$\Box$ Inspect the document(s) $\Box$ A copy of the document(s)								
☐ Access in a	nother way (please specify	()						
DISCLOSURE I	_OG							
	sought is released to you a e recorded in Council's 'dis							
Do you object to t	his?	□ Yes		No				
PRIVACY								
regarding the state authorised to do s	ne purpose of assessing your application. Your application. Your including the decision notes that the Privacy and Personal Ir	our personal informat naker for your applica	ion will b	e accessed by per	rsons who have been			
SIGNATURE								
	It the information given on the that I must seek the Copy rounds.				a copyright document			
Applicant's name		Applicant's signatu	ure		Date			
HOW TO LODG	E THIS APPLICATION							
In manage	Cooleman Ohios Coolean		Melli	Coolamon Shire C	Saail			
In person:	Coolamon Shire Council 55 Cowabbie Street		Mail:	PO Box 101	COUNCII			
					2704			
	Coolamon NSW 2701			Coolamon NSW 2				
	8.30am – 5.00pm Monda	y to Friday	Email:	council@coolamo	n.nsw.gov.au			



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Information about the GIPA Act is available by calling the Information and Privacy Commission on freecall 1800 472 679 or at its website www.ipc.nsw.gov.au