

Application for access under Section 13 of the Freedom of Information Act 1991

To: City of Adelaide

Attn: Freedom of Information Officer

GPO Box 2252 Adelaide SA 5001

Details of Applicant			
Surname:			
Given Names:		Title: (Mr/s etc)
Australian Postal Address (required under	Section 13(e) of the F	FOI Act for your applicatior	to be valid):
	Postcode: .	Tel:	
Email address (if applicable):(Counc	cil will correspond via	this method unless you re	quest otherwise)
Details of Application			
I request access to document(s) conce	erning:		
These documents do / do not (Please cross o		ation about my pers does not apply.)	onal affairs.
Form of Access			
Place a tick in the appropriate box. If a form required.	ccess in anothe	er form is required p	olease specify
I wish to inspect the document(s) I require a copy of the documents I require access in another form	() Yes () Yes () Yes		

(Please specify form required)



Fees and Charges

Attached is a cheque/money order/cash to the amount of \$40.75 to cover the application fee. (Please do not send cash through the mail).

I understand that I may be required to pay processing charges in respect of this request and that I will be supplied with a statement of charges if appropriate.

In certain cases a reduction in fees and charges may apply. If y to a reduction, send copies of supporting documents with this fe			
I am requesting a reduction in fees and charges (please tick ap	propriate box)		
() Yes () No			
For further information Refer to the Freedom of Information Act, 1991 - available from the Government of South Australia (South Australian Legislation) web site at www.legislation.sa.gov.au .			
Applicant's Signature			
	Date//		