

APPLICATION FOR ACCESS TO INFORMATION UNDER THE RIGHT TO INFORMATION ACT, 2019 (ACT 989)



1.	Name of Applicant:	
2.	Date:	
3.	Institution:	

4.	Date of Birth:	DD	MM	YYYY
5.	Type of Applicant:	Individual <input type="checkbox"/> Organization/Institution <input type="checkbox"/>		
6.	TIN Number:			
7.	If Represented, Name of Representative:			
7 (a).	Capacity of Representative:			
8.	Type of Identification: <input type="checkbox"/> National ID Card <input type="checkbox"/> Passport <input type="checkbox"/> Voter's ID <input type="checkbox"/> Driver's License			
8 (a).	ID. No.:			
9.	Description of the Information being sought (specify the type and class of information including cover dates):			

10.	Manner of Access: <input type="checkbox"/> Inspection of Information <input type="checkbox"/> Copy of Information <input type="checkbox"/> Viewing / Listen <input type="checkbox"/> Written Transcript <input type="checkbox"/> Translated (specify language)	
10 (a).	Form of Access: <input type="checkbox"/> Hard copy <input type="checkbox"/> Electronic copy <input type="checkbox"/> Braille	
11.	Contact Details:	Email Address_____ Postal Address_____ Tel: _____
12.	Applicant's signature/thumbprint:	
13.	Signature of Witness (where applicable) <i>"This request was read to the applicant in the language the applicant understands and the applicant appeared to have understood the content of the request."</i>	

Notice of Decision

14.

FOR OFFICE USE:

Received By:

(Information Officer)

Date Submitted: _____

15. DECISION:

15 (a).

☐

Access Granted

☐

Partial Access Granted

Reason for Partial Access:

15 (b).

☐

Application Transferred

Date of Transfer: _____

Institution: _____

15 (c).

☐

Deferred Access

Reason for Deferment

☐

Information will be published within 90 days

☐

Information is yet to be submitted

Duration of Deferment: _____

15 (d).	<div data-bbox="295 197 1404 1198"><div data-bbox="295 197 335 246"><input type="checkbox"/></div><div data-bbox="371 197 603 235">Access Denied</div><div data-bbox="384 264 671 302">Reasons for Denial:</div><div data-bbox="295 331 335 380"><input type="checkbox"/></div><div data-bbox="384 331 1310 369">Information for the President or the Vice- President (s.5, Act 989)</div><div data-bbox="295 398 335 448"><input type="checkbox"/></div><div data-bbox="384 398 1029 436">Information Relating to Cabinet (s.6, Act 989)</div><div data-bbox="295 465 335 515"><input type="checkbox"/></div><div data-bbox="384 465 1396 504">Information Relating to Law Enforcement & Public Safety (s.7, Act 989)</div><div data-bbox="295 533 335 582"><input type="checkbox"/></div><div data-bbox="384 533 1206 571">Information Affecting International Relations (s.8, Act 989)</div><div data-bbox="295 600 335 649"><input type="checkbox"/></div><div data-bbox="384 600 1265 638">Information that Affects the Security of the State (s.9, Act 989)</div><div data-bbox="295 667 335 716"><input type="checkbox"/></div><div data-bbox="384 667 1091 705">Economic and Any Other Interests (s.10, Act 989)</div><div data-bbox="295 734 335 784"><input type="checkbox"/></div><div data-bbox="384 734 1139 772">Economic Information of Third Parties (s.11, Act 989)</div><div data-bbox="295 801 335 851"><input type="checkbox"/></div><div data-bbox="384 801 986 840">Information Relating to Tax (s.12, Act 989)</div><div data-bbox="295 869 335 918"><input type="checkbox"/></div><div data-bbox="384 869 1286 907">Internal Working Information of Public Institution (s.13, Act 989)</div><div data-bbox="295 936 335 985"><input type="checkbox"/></div><div data-bbox="384 936 1358 974">Parliamentary Privilege, Fair Trial, Contempt of Court (s.14, Act 989)</div><div data-bbox="295 1003 335 1052"><input type="checkbox"/></div><div data-bbox="384 1003 916 1041">Privileged Information (s.15, Act 989)</div><div data-bbox="295 1070 335 1120"><input type="checkbox"/></div><div data-bbox="384 1070 1040 1108">Disclosure of Personal Matters (s.16, Act 989)</div><div data-bbox="295 1137 335 1187"><input type="checkbox"/></div><div data-bbox="384 1137 979 1176">Non – existent Information (s.24, Act 989)</div></div>
16.	<div data-bbox="295 1384 839 1422">Signed: _____</div> <div data-bbox="922 1384 1433 1422">Date of Notice: _____</div> <div data-bbox="295 1496 839 1572">Name: _____ Information Officer</div>



Acknowledgement

This is to acknowledge that your request for information was received:

Date: _____

Time: _____

Institution of receipt: _____

Name of receipt: _____

[Official Stamp]

Designation: _____

To receive notice of the decision on your request kindly visit:

Place: _____

Date: _____

Time: _____