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| MRSC logo MS Word cropped.jpg | **Freedom of**  Information |
| ABN 42 686 389 537 – PO BOX 151, KYNETON VIC 3444  T 03 5422 0333 – F 03 5422 3623 – [mrsc@mrsc.vic.gov.au](mailto:mrsc@mrsc.vic.gov.au) – www.mrsc.vic.gov.au | |

Application Fee: $32.70

We may be able to provide the document/s that you are seeking outside the FOI Act. Please contact the Governance Team on 5422 0333 or email [governance@mrsc.vic.gov.au](mailto:governance@mrsc.vic.gov.au) to discuss your request **before completing this form.**

|  |  |
| --- | --- |
| Name: |  |
| Please provide either an email address (if one is available), or a postal address as your preference to receive correspondence. | |
| Email: |  |
| Postal address: |  |
| Phone (home or mobile): |  |

I am completing this application on behalf of another person and have attached a signed and dated authorisation form.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | **Person’s name:** |  |
|  | No, I am completing this form for myself | | |

When making your request, please be specific - provide dates, document type/s, identify people or groups. Avoid using statements like **‘all documents’** or ‘**including but not limited to’**.

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| Under the *Freedom of Information Act* 1982, I wish to gain access to the following document/s  for the date range from       to       (up to the date of your request) |

**Form of access requested**

|  |  |
| --- | --- |
|  | I request copies of the document/s be sent to me **OR** I wish to inspect the original document/s |

**Fee and charges**

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|  | I acknowledge the application fee is payable once this request is **valid** and understand that further access charges will be applicable for search time and photocopying. |

Where the payment of application fees or charges may cause financial hardship, an applicant may apply for a reduction of waiver. If you wish to request consideration for a reduction or waiver, please state the reason for your request below, e.g.; You currently hold a Commonwealth Pension or Commonwealth Health Care Card.

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**Personal affairs information**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Please note, if your request seeks access to documents that contain personal affairs information (names, contact details or other identifying information), Council must consult with every person and seek their views on the release of their personal information. The requirement to consult may extend the due date for your request.

Is personal affairs information relevant to the scope of your request?

(If no, personal affairs information will be redacted from any documents released.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes |  | No |  |

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|  |

Yes  No

If yes, for the purposes of consultation, do you consent to Council identifying you as the applicant?

|  |
| --- |
| If yes, please outline the purpose of your request: |

Do you consent to Council disclosing the purpose of your request?

**General**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Are **duplicated** documents relevant to your request? (If no, duplicated

documents will be excluded from this request).

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes |  | No |

Please advise if you wish to receive **edited** copies of documents that

would otherwise be exempt?

We will review your FOI application and contact you to let you know how you may be able to access the documents you are seeking, including whether you need to proceed with your request. If we suggest proceeding with your FOI request we will assist you with making your request valid, including payment of fees.

**Privacy collection notice**

Macedon Ranges Shire Council is committed to protecting your privacy. The personal information you provide on this form is being collected for the primary purpose of your Freedom of Information application in accordance with the *Freedom of Information Act 1982*.

Where required, your name and contact details and any hardship waiver application, will be provided to Macedon Ranges Shire Council staff/contractors/consultants to enable them to process your application. If the personal information is not provided, we will not be able to process your application.

Your personal information will not be disclosed to any external party without your consent, unless required or authorised by law. If you wish to gain access to or alter any personal information you have supplied on this application form, please contact Macedon Ranges Shire Council via phone (03) 5422 0333 or email [mrsc@mrsc.vic.gov.au](mailto:mrsc@mrsc.vic.gov.au).

Information provided will be stored in accordance with Council’s Record Management Policy and destroyed in accordance with the Public Records Act 1973. You can access Council’s Privacy Policy at mrsc.vic.gov.au