

# Freedom of Information

**Application for access to documents**  
Under the Freedom of Information Act 1992, Section 12



Details of Applicant	
<b>Applicant Name</b>	
<b>Australian Postal Address</b>	
<b>Contact Number</b>	
<b>Email</b>	

I wish to apply for access to the following documents:

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*(Please give enough information to identify the document and provide a date range if relevant. Attach an additional sheet if necessary)*

Form in which access is requested (please tick appropriate box)

I require a copy of the documents  I require access in another form

Please specify:

Signature of Applicant	
<b>Signature</b>	
<b>Date</b>	

**APPLICATION FEE TO BE PAID ON LODGEMENT**  
Application fee: \$30.00

Code: 1RE810.84

Receipt No: \_\_\_\_\_

Date: \_\_\_\_\_



**In person**  
(Cash, Cheque, EFTPOS)

Shire Civic Administration Centre  
41 Wallcliffe Rd  
Margaret River



**Telephone**  
(Credit Card only)

**Please tick**   
A Customer Service  
Officer will contact you.



**Post**  
(Cheque - made payable to Shire of  
Augusta Margaret River)

Shire of Augusta Margaret River  
PO Box 61  
Margaret River WA 6285

FREEDOM OF INFORMATION