



APPENDIX I

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APPLICATION FORM FOR ACCESS TO OFFICIAL DOCUMENT

THE ACCESS TO INFORMATION ACT, 2002

APPLICATION FORM FOR ACCESS TO OFFICIAL DOCUMENT

(Please use a separate application form for each document requested)

1. Title of Public Authority:.....
(Please state the title of the public authority from which you are requesting the document).

2. Name of Applicant:
(Print)
Last.....
First.....Middle.....

3. Address:
(Please indicate the address to which correspondence related to your application should be sent).

Mailing..... Business.....
.....
.....

Tel: Fax:..... Tel:..... Fax:.....

Email..... Other.....
.....
.....

4. Description of Document:
(Please state all information available to you which will assist us in filling your request quickly).

Name/Type of Document (if known)

Reference/File No. (if known)

Other.....
.....
.....

5. I would like to:
(Please check the relevant box (es))

- inspect the document
- listen to the document
- view the document

have a copy (ies) of the document made available to me in the following format:

- photocopy
- compact disc
- diskette
- transcript
- other (*please specify*).....

Number of copies required:

Please note that:

- ***payment will be required before copies are made;***
- ***information on available formats and prices per copy may be obtained from the relevant public authority;***
- ***where the provision of copies in the requested format is not possible, an alternative format, as may be agreed between the parties, will be made available.***

Date.....

Signature of Applicant

Note: Responsible Officers should complete a Memorandum of Attestation & Verification if an Application is completed by him/her on behalf of the Applicant.

**APPLICATION FORM FOR AMENDMENT/ANNOTATION OF
PERSONAL RECORD**

THE ACCESS TO INFORMATION ACT, 2002

Application Form for Amendment/Annotation of Personal Record

1. Title of Public Authority:
(Please state the title of the public authority to which the request for amendment/annotation is being directed).

2. Name of Applicant:
(Print)
Last..... First..... Middle.....
Alias (es)***(if any)***

3. Address:
(Please indicate the address to which correspondence related to your application should be sent).
Mailing..... Business.....
.....
.....

Tel:..... Fax:..... Tel:..... Fax:.....
Email..... Other.....
.....
.....

4. I require an amendment/annotation of the official document stated below as the information which it contains about me is:
(identification may be required)
 Incomplete
 Incorrect
 Out of date
 Misleading

5. Description of Document:
(Please state all information available to you which will assist us in filling your request quickly).
Name/Type of Document (if known)
Reference/File No. (if known)
Other.....
.....
.....
.....

6. The information in respect of which the above claim is being made indicates that:

.....
.....
.....

7. State the basis of your claim:

.....
.....
.....

8. The amendment(s) required is/are:

.....
.....
.....

9. The annotation(s) required is/are: ***(state the information which would render the document, described at 5 above, complete, correct, up to date or not misleading and attach the statement, signed by you, to this application).***

.....
.....

Note: Please submit any documents/evidence in support of the amendment/annotation requested).

Date..... Signature of Applicant

Note: Responsible Officers should complete a Memorandum of Attestation & Verification if an Application is completed by him/her on behalf of the Applicant.

CERTIFICATE OF EXEMPTION

THE ACCESS TO INFORMATION ACT, 2002

Certificate of Exemption

In accordance with S. 23 of the Access to Information Act, this is to certify that the

- official document
- part (s) of the official document

requested under Application for Access to Official Document Reference Number , dated and being the document described hereunder:

(describe exempt document or exempt part(s) of document)

.....
.....
.....

is/are exempt pursuant to s.....***(state relevant section)*** of the Act for the following reasons:

.....
.....
.....

Dated this day of, 20..... (year)

Signed:.....
Prime Minister

Signed:.....
Minister of.....
(insert name and title of relevant Minister)

RESPONSE FORM LETTER A

RESPONSE
TO APPLICATION FOR OFFICIAL DOCUMENT

ACKNOWLEDGEMENT/TRANSFER OF APPLICATION

[This Form Letter is to be used for the acknowledgement of the receipt of Applications, the transfer of Applications and the disclosure of routinely available documents].

Ref. No:.....

Date:.....

(Insert Applicant's Name & Address)

Dear *(Applicant's Name)*:

Re: Access to Information Act – Request for Information

Thank you for your application dated [] and received by us on
.....
(insert date of receipt)

- We will undertake the necessary research in order to respond to your request within the prescribed period of **thirty (30) days**.
- The official document(s) for which you have applied is/are already published and available. It/They may be obtained from:

.....

.....

- The Document(s) requested is not within the subject matter portfolio of this Public Authority. Your Application has therefore been transferred to the **Public Authority indicated below**, which handles this area of interest:

Name of Public Authority.....

Date of Transfer

Contact Information:

RESPONSE FORM LETTER B

RESPONSE
TO APPLICATION FOR ACCESS TO OFFICIAL DOCUMENT

GRANT OF ACCESS

[This Form Letter is to be used when full access is being granted to the Applicant]

Ref. No:.....

Date:.....

(Insert Applicant's Name & Address)

Dear (*Applicant's Name*):

Re: Access to Information Act – Request for Information

Further to your application for access to information under the Access to Information Act dated and received by us on, the *[name of Public Authority]* is pleased to grant you access to the document(s) requested being:

(describe document requested in application)

.....
.....
.....

Option 1

You requested a copy (ies)/transcript of the Document(s):

- A cost of \$ _____ is payable prior to its reproduction. Please make arrangements with the Responsible Officer indicated below for payment to be made. Upon payment, copies will be made for you which you may collect at:

.....
.....

(A Declaration on matters pertaining to copyright protection at Form must be signed by the Applicant where the Public Authority discerns that copyright resides or may reside in a third party)

- You desire to:

- examine
- view
- listen to

the original document. We invite you to do so at [*address*] on [*date*] at [*time*]. Please confirm that the date and time indicated are suitable to you by contacting the Responsible Officer indicated below.

Option II

- The document cannot be provided in the format in which it has been requested as to do so would:
 - be detrimental to the preservation of the document
 - be inappropriate due to its physical state
 - constitute an infringement of copyright subsisting in matter(s) contained in the document.

It may, however, be provided as a [*state format*] (at a cost of \$_____). Please contact the Responsible Officer indicated below to further discuss the matter and to make necessary arrangements as relevant.

Option III

- The document(s) requested cannot be provided in the manner indicated on your application. However, we invite you to:
 - examine,
 - view,
 - listen to

the document(s) in an original or other format at [*address*] on [*date*] at [*time*]. Please confirm that the date and time indicated are suitable to you by contacting the Responsible Officer indicated below.

NOTE: Under S. 30 of the Access to Information Act, you may ask for an Internal Review of a response to your request:

- *refusing to grant access;*
- *granting access to only some of the documents specified in your application;*
- *deferring the grant of access to the document;*
- *refusal to amend or annotate an official document containing personal information*
- *charging a fee for action taken or as to the amount of the fee charged;*

and where the decision was taken by a person other than the responsible Minister, Permanent Secretary, or the principal officer of the public authority.

You have 30 days from the date of receipt of this Notice to request an Internal Review, by writing to the Public Authority in question and including:

- *Your name, address and telephone number;*
- *A copy of your Application or the Reference Number assigned to your Application;*
- *A copy of this letter;*
- *If so inclined, the basis on which you are requesting a Review of the decision indicated*

If upon Review, the decision is still not favourable to you, you have the right to appeal to the Appeal Tribunal within 60 days of:

- *the date of notification of the decision taken at Internal Review, or*
- *a decision taken by a responsible Minister or head of a Public Authority, or*
- *after the date on which notification of the decisions referred to above should have been taken but of which you received no notification .*

Sincerely,

Name:
(*Print*) (*Signature*)

Title:

Address of Public Authority:

Contact Information:

Tel:.....(o)(cellular) **Optional**

Fax:.....

E-mail:.....

RESPONSE FORM LETTER C

RESPONSE
TO APPLICATION FOR ACCESS TO OFFICIAL DOCUMENT

DENIAL/DEFERRAL/PARTIAL GRANT OF ACCESS

[This Form Letter is to be used when access is being denied, deferred, or access to only parts of or some of an official document(s) is being granted]

Ref. No:.....

Date:.....

(Insert Applicant's Name & Address)

Dear (*Applicant's Name*):

Re: Access to Information Act – Request for Information

Further to your application dated (*insert date of application*) for access to information under the Access to Information Act, we wish to advise you as follows:

Option I
(Document Exempt)

Your application has been regrettably denied as the document requested is an exempt document(s) pursuant to s. of the Access to Information Act.
(If a Certificate of Exemption has been issued under Sections 14, 15, 16 or 18 in respect of this type of document, it must accompany this form letter)

Option II

A.

The document requested is exempt as its disclosure would prejudice the interest of other parties in the following contexts:

- Personal Privacy
- Trade Secrets
- Information of a commercial value

B.

The document requested may not be disclosed by us as to do so would be in breach of:

- o confidence
- o copyright

We wish to inform you that further investigation of these interests was conducted with the third party (ies) involved in order to determine whether the release of the document could have been agreed to in whole or in part. Regrettably this was not agreed to.

❑ **Option III**
(Official Document contains Exempt Matter)

The document(s) requested contains exempt matter which has been deleted pursuant to s. [indicate relevant exempt category] of the Access to Information Act. A copy (ies) will be made available at [address] on [date] at [time]. Please confirm whether the date and time indicated are suitable to you by contacting the Responsible Officer below.

❑ **Option IV**
(Deferral)

Access to the Document requested has been deferred pursuant to S. 10 of the Access to Information Act for the following reason (s) and until the happening of the actions stated herein:

- ❑ Publication of the document within a particular period is required under the provisions of (*state name of Statute*);
- ❑ The document has been prepared for presentation to Parliament;
- ❑ The document was prepared for the purposes of being made available to a particular person or body;
- ❑ The release of the document at this time would be contrary to the public interest;

Access to the document(s) will be granted on the [day] of [month], [year]. Please contact the Responsible Officer below for further information as may be required.

NOTE: Under S. 30 of the Access to Information Act, you may ask for an Internal Review of a response to your request:

- *refusing to grant access;*
- *granting access to only some of the documents specified in your application;*
- *deferring the grant of access to the document;*
- *refusal to amend or annotate an official document containing personal information*
- *charging a fee for action taken or as to the amount of the fee charged;*

and where the decision was taken by a person other than the responsible Minister, Permanent Secretary, or the principal officer of the public authority.

You have 30 days from receipt of this Notice to request an Internal Review, by writing to the Public Authority in question and including:

- *Your name, address and telephone number;*
- *A copy of your Application or the Reference Number assigned to your Application;*
- *A copy of this letter;*
- *If so inclined, the basis on which you are requesting a Review of the decision indicated*

If upon Review, the decision is still not favourable to you, you have the right to appeal to the Appeal Tribunal within 60 days of:

- *the date of notification of the decision taken at Internal Review, or*
- *a decision taken by a responsible Minister or head of a Public Authority, or*
- *the date on which notification of any of the decisions referred to above should have been given but was not so given*

Sincerely,

Name: (Print) (Signature)

Title:

Address of Public Authority:

Contact Information:

Tel:.....(o)(cell) *Optional*

Fax:.....

E-mail:.....

****RESPONSE FORM LETTER D**

RESPONSE
TO APPLICATION FOR ACCESS TO OFFICIAL DOCUMENT

MISCELLANEOUS PROVISIONS

[This Form Letter is to be used when an Official Document cannot be found, does not exist or, prior to the receipt of an Application to which it is relevant, has been destroyed upon the directions of/pursuant to a relevant authority or enabling statute]

Ref. No:.....
Date:.....
Insert Applicant's Name & Address

Dear (*Applicant's Name*):

Re: Access to Information Act – Request for Information

We have reviewed your application (*date of request*) for access to information under the Access to Information Act and wish to advise you as follows:

Option I

Efforts to locate the document for which you applied have not been successful to date. Please indicate whether you wish us to continue our efforts for an additional **thirty (30)** days by contacting the Responsible Officer indicated below in writing. Any additional information which you can provide to assist us in locating the document would be appreciated.

Option II

The document requested does not exist.
[indicate the steps taken to ascertain the existence of the document]
.....
.....
.....

Option III

The document requested was destroyed, prior to your Application, and under the authorization of/pursuant to:
[indicate the body or the Statute which authorized the destruction of the document]

.....
.....
.....

Sincerely,

Name:
Responsible Minister (Signature)

Name:
Principal Officer (Signature)

Address of Public Authority:

Contact Information:

Tel:.....(o)(cellular) *Optional*

Fax:

E-mail:

****Note:**

(Both the Responsible Minister and the Principal Officer of the Public Authority must sign this Form Letter. A Declaration of Search, Form D1, completed and signed by both the Principal Officer and the Responsible Minister as verification of the truth of any of the Options chosen, must also be attached)

FORM D¹

Declaration of Search
Pursuant to the Voluntary Declarations Act
& the Attestation of Instruments (Facilities) Act

I, *(name and title of Principal Officer)*, of *(give business address)*, declare and say as follows:

1. That on the *(date)* day of *(month)*, *(year)*, an Application under the Access to Information Act in the name of *(state name of Applicant and reference number of Application)* was received by the *(state name of Public Authority)*

2. That the Application requested access to the following official document(s):
(State document(s) requested in Application)

.....
.....
.....
.....

3. That a search was conducted by *(name of Responsible Officer and/or other Officers responsible for search)* in the following respects:

(State particulars of search)

.....
.....
.....
.....

4. That further to the search conducted, the document:

(State relevant result of search)

- cannot be found
- does not exist
- was destroyed on the *(date)* day of *(month)*, *(year)* in accordance with /under the directions of (*state enactment or body under whose authority the document was destroyed*)

1

5. That I solemnly believe and verify the truth of the
(State relevant result):

- inability to locate
- non-existence of

□ destruction of

the document requested.

I, (*insert name of Principal Officer*)
do solemnly and sincerely declare)
that (state.....) and I make this)
solemn declaration conscientiously) (*Signature of Principal Officer*)
believing the same to be true)

Taken and acknowledged this day of, (*insert year*), before me

.....
(*print name of Responsible Minister*)

Minister of and Member of Parliament
(*insert name of Public Authority*)

OR

Taken and acknowledged this day of, (*insert year*), before me

.....
Justice of the Peace for the Parish of.....

RESPONSE FORM LETTER E

RESPONSE
TO APPLICATION FOR ACCESS TO OFFICIAL DOCUMENT

THIRD PARTY NOTIFICATION

[This Form Letter is to be used to advise a third party that an Applicant has requested access to an official document that contains information which may affect the third party's business interests or personal privacy]

Ref. No:.....

Date:.....

Insert Third Party's Name & Address

Dear *(insert Third Party's Name)*:

Re: The Access to Information Act – Application for Access to Official Document

The *(insert name of Public Authority)* has received a request under the Access to Information Act (“the Act”) to disclose *(describe the document as it relates to the Third Party)*. A copy of such parts of the document containing information that pertains to you accompanies this letter *(include a copy of the record whenever possible)*.

We would appreciate receiving your views regarding the disclosure of this information and we therefore wish to bring the following to your attention:

Option 1

(Section 20 - Business Affairs)

Section 20 of the Act indicates that the *(name of the Public Authority), being a Public Authority to which the Act applies*, must disclose information to an Applicant unless its disclosure would reveal:

- Trade secrets;
- Any other information of a commercial value, which value would be or could reasonably be expected to be, destroyed or diminished if the information were disclosed.

A copy of Section 20 of the Act is attached to this letter to assist you. After reviewing the material, please indicate whether you consent to the disclosure of the information by writing to the Responsible Officer below by *[insert date]*. You may either:

- (1) consent to the disclosure of the information;
or,
(2) make written representations explaining why the information should not be disclosed.
by providing clear and specific reasons that focus on the type of harm that may result as specified in Section 20 of the Act.

Please note that if we do not receive written representations from you by the date indicated, a decision will have to be made based on the information that we have available to us. In that event, we will write to you to inform you of the decision that was so taken.

Option II
(Section 22 – Personal Privacy)

Section 22 of the Act indicates that the (*name of the Public Authority*) is required to withhold personal information if it is determined that disclosure thereof would be unreasonable and result in an invasion of any person's personal privacy.

Disclosure of the requested documents might be an unreasonable invasion of your personal privacy and so your input would be valuable in helping us to decide whether to disclose them or not.

A copy of Section 22 of the Act is attached to this letter to assist you. After reviewing the material, please provide your views on the disclosure of the records in writing to the Responsible Officer below by..... [*insert date*]. You may either:

- (1) consent to the disclosure of the information;
or,
(2) make written representations explaining why the information should not be disclosed.
by providing clear and specific reasons that will indicate why the disclosure would be unreasonable pursuant to Section 22 of the Act.

Please note that if we do not receive written representations from you by the date indicated, a decision will have to be made based on the information that we have available to us. In that event, we will write to you to inform you of the decision that was so taken.

Sincerely,

Name:
(Print)

.....
(Signature)

Title:

Address of Public Authority:

Contact Information:

Tel:.....(o)(cellular) *Optional*

Fax:

E-mail:

RESPONSE FORM LETTER F

RESPONSE
TO APPLICATION FOR AMENDMENT/ANNOTATION OF PERSONAL
RECORDS

AMENDMENT/ANNOTATION OF PERSONAL RECORDS

[This Form Letter is to be used to advise an individual whether or not a request for amendment/annotation has been agreed to and, where it has not, that the record has been so annotated].

Ref. No:.....

Date:.....

(Insert Applicant's Name & Address)

Dear (Applicant's Name):

Re: The Access to Information Act – Request for Amendment/Annotation of Personal Records

We have reviewed your application (*insert date of request*) and wish to advise you as follows:

Option 1:

(Correction Agreed To)

Your request for a correction of [*state the information provided on the application form*] has been agreed to and your record has been corrected as you requested.

A copy of

- your new record
- that part of your new record

incorporating the correction accompanies this notice

or

you may inspect the corrected record at [address]. Please contact the Responsible Officer indicated below to establish an appropriate time for this exercise.

Option II:

(Correction Refused)

Your request for a correction of [*state the information provided on the application form*] has been refused for the following reason (s):

.....
.....

In accordance with S. Your record has been annotated to indicate the correction that you requested and the fact that it was not made

Note:

Public Authorities to which the information has been disclosed over the last year have been informed of the fact of [*the amendment/ annotation or refusal of amendment /annotation*] and have been requested to amend their files to reflect this information. The Public Authorities so informed include:

.....
.....
.....

NOTE: Under S. 30 of the Access to Information Act, you may ask for an Internal Review of a response to your request:

- *refusing to grant access;*
- *granting access to only some of the documents specified in your application;*
- *deferring the grant of access to the document;*
- *refusal to amend or annotate an official document containing personal information*
- *charging a fee for action taken or as to the amount of the fee charged; and where the decision was taken by a person other than the responsible Minister,*
Permanent Secretary, or the principal officer of the public authority.

You have 30 days from the date of receipt of this Notice to request an Internal Review, by writing to the Public Authority in question and including:

RESPONSE FORM LETTER G

RESPONSE
TO APPLICATION FOR ACCESS TO OFFICIAL DOCUMENT

NON-APPLICATION OF ACT TO ENTITY

[This Letter is to be used to advise an Applicant that the Access to Information Act does not currently apply to its functions

Ref. No:.....

Date:.....

Insert Applicant's Name & Address

Dear (Applicant's Name):

Re: Access to Information Act – Request for Information

Thank you for your application for information under the Access to Information Act. We wish to inform you that at this point in time, the Access to Information Act is not now applicable to this Ministry. However, in the spirit of the Act, we wish to assist you in the following respect:

Option 1

- The information requested by you has already been made available for use by the public at this Ministry/Entity and may be obtained at (state where information can be viewed/inspected/downloaded, etc).

Option II

- Checks made by us have revealed that the (state Ministry /Entity) currently administering the Act under Phase I of the Implementation Schedule would be better able to handle your application.

Your application has therefore been transferred to that Ministry. We now invite you to contact (**State full particulars of Responsible Officer, (name, location, telephone and fax number)**) who is now awaiting your call.

Option III

In a continuing bid to serve our public, we will keep your application on record and will be back in contact with you as soon as the Act becomes applicable to us.

Again we thank you for your interest in the matter at hand and look forward to serving you at the appropriate time.

Sincerely,

.....
Permanent Secretary

.....
Responsible Officer

FORM H

Memorandum of Attestation

(This Memorandum is to be completed where the Responsible Officer completes the Application form for an Applicant who is unable to do so by reason of inability or limited ability to read or write English or mental or physical disability, or other condition that impairs his ability to make a request by other means)

This Application for Access to Information was signed by:

- me [*print name of Responsible Officer*] in the presence of the Applicant [*print name of Applicant*]
- the Applicant [*name of Applicant*]
- the Applicant [*name of Applicant*] by his mark

the completed Application having been executed by me pursuant to the Access to Information Regulations, 2003 and having been first read over by me, or communicated, to the Applicant, before signing, and who appeared thoroughly to understand and agree with the contents herein.

Signed :

.....
Responsible Officer

.....
Witness

.....
Applicant

FORM I

The Access to Information Act

Declaration

Copy of Official Document or Part of Published Work

To:

**The Principal Officer (*name & title*)
Public Authority (*name & address*)**

1. Please supply me with a copy of:

(a) *The official document, the particulars of which are:

.....
.....
.....

(b) *The part of the published work, the particulars of which are

.....
.....
.....

required by me for the purposes of research or private study.

2. I declare that:-

(a) I have not previously been supplied with a copy of the same material by you or any other Public Authority;

(b) I will not use the copy except for research or private study and will not supply a copy of it to any other person; and

(c) To the best of my knowledge no other person with whom I work or study has made or intends to make, at or about the same time as this request, a request for substantially the same material for substantially the same purpose.

3. I understand that if the declaration is false in a material particular the copy supplied to me by you will be an infringing copy and that I shall be liable for infringement of copyright as if I had made the copy myself.

**Signature.....
Date.....

Name of Applicant.....

Address.....
.....
.....

* *Delete whichever is appropriate*

**** This must be the personal signature of the person making the request. A stamped or typewritten signature, or the signature of an agent is NOT ACCEPTABLE.**