

## FORMAL REQUEST FOR INFORMATION FORM

Date .....

Time .....

Mode of request .....

### APPLICANT'S DETAILS:

Name..... ID No.....

Gender..... PWD YES ..... NO .....

Address P.O. Box ..... Postcode..... City/Town: .....

Mobile ..... Email .....

Summary of the information being sort .....

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

Signed by .....(Applicant)

Received by:

Name.....

Sign .....

### Method of access preferred (tick preferred option)

1. Receive printed copies of original

2. Email scanned copied

3. Perusal of original copies