

Processing Fees/Waiver or Reduction of Fees

Fees will be incurred in accordance with the attached schedule for the processing of the application. If you wish to apply for a reduction or waiver of processing fees a separate application should be completed and lodged at the same time as the application for access.

I attach an Application to Waive/Reduce Fees form:

YES

NO

Identification

Under Section 18 of the Act the Public Sector Organisation must be satisfied as to your identity before it accepts your application. The Department of Natural Resources, Environment, the Arts and Sport will accept the following forms of identification; Drivers Licence, Passport or some other card or document that identifies who you are. A copy of your ID will be kept on file for three months after the file is closed.

If you are lodging your application by post, facsimile or e-mail an authenticated copy of your identification must be supplied either by a Commissioner of Oaths, member of the Police Force, Registered Nurse, or a person who has known you for five years or more. You will be contacted if more information is required by the organisation to satisfy itself as to your identity.

Declaration

I (*Applicants Full Name*) _____ certify that all the information supplied by me concerning this application is complete and correct. I accept that the information provided by me in this application may also be disclosed to other persons and/or bodies where such disclosure is required by law.

Declared at

(Location)

on

(Day)

day of

(Month)

, (Year)

SIGNATURE 

Date: _____

Notes: (Section 146)

1. A person providing false or misleading information or statements to a public sector organisation or the Commissioner is liable to a penalty of \$22,000 or 12 months imprisonment.
2. A person knowingly making a false or misleading statement or a material omission in a statement for the purpose of gaining access to another's personal information or another persons business, professional, commercial or financial affairs is liable to a penalty of \$11,000 or 6 months imprisonment.

Mailing Address:
Information Unit, Legal Services
PO Box 496, PALMERSTON NT 0830

Office Use Only:

Receipt No:	_____		Date:	_____
Reference / Request Number:	_____			
Date Application Lodged/Received:	_____			
Application Fee Received:	Yes / No	(please circle)		
Satisfied as to Identity of Applicant:	Yes / No	(please circle)		
Basis for Satisfaction of Identity:	_____			
Receiving Officer's Name: (please print)	_____			
Signature of Receiving Officer:	_____			