

## Request for Access to Records under the Freedom of Information Act 2014

Please use BLOCK letters

	Details of Applicant	
Surname:		
First Name:		
Postal Address:		
Eircode		
Telephone Number(s)	Office Use Only	
Home:	Date FOI Request Received	
Business:	Identity Verified	
	Consent Confirmed	

## **Personal Information**

Before you are given access to personal information relating to yourself, you may be asked to provide proof of your identity.

Form of Access			
My preferred form of access is: (please tick as appropriate)			
to receive copies of records by email/electronic format other - please specify:			
Details of Request			
In accordance with Section 12 of the FOI Act, I request access to records which are:  (please tick as appropriate) Personal □ Non personal □			
(In the space provided please describe the records as fully as you can. If you are requesting personal information, please state precisely in whose name those records are held. You will not normally be given access to personal information of another person unless you have obtained the written consent of that person).			
I request access to the following records:			

PLEASE SIGN HERE: \_\_\_\_\_ DATE: \_\_\_\_