

APPLICANT DETAILS

Preferred Title: Mr Mrs Miss Ms Other (*tick one*)

Surname: _____

First Name(s): _____

Address for correspondence: _____

Email: _____

Telephone: _____

(AH): _____

Mobile: _____

Business Telephone: _____

Preferred method of contact: Telephone Email Mail

Privacy: *The Information Act* (The Act) requires you to supply your name and an address for correspondence. Additional contact details will assist City of Palmerston to deal with your application. Personal information supplied in the course of an application may be used or disclosed in order to deal with the application and any review or complaint arising from the application.

INFORMATION TO BE CORRECTED

Please provide sufficient details about the information that you are requesting be corrected so that the Council will be able to identify the information e.g. dates, location, subject matter. If insufficient space, please attach a separate sheet a paper.

REASON FOR APPLICATION TO CORRECT PERSONAL INFORMATION

Please provide reasons for your application e.g. my personal information held by Council is inaccurate, incomplete, or out of date. If insufficient space, please attach a separate sheet of paper.

SPECIFY THE CORRECTION YOU WANT TO MAKE TO YOUR PERSONAL INFORMATION

If insufficient space, please attach a separate sheet of paper

FEES AND CHARGES

There are no Fees and Charges in relation to an application to correct personal information.

DECLARATION

I certify that the information supplied by me concerning this application is complete and true to the best of my knowledge.

Signature: _____

Date: _____

NOTES FOR THE CORRECTION TO PERSONAL INFORMATION APPLICATION

1. Identification

You will be asked to show identification when lodging this application. If posting your application, please attach a photocopy of your driver's licence, passport, another form of approved identification documentation. This is ensuring that the Council is satisfied as to your identity.

2. Where to lodge this application

This application can be lodged at the Customer Service Desk located at, City of Palmerston Civic Plaza, ground floor, 1 Chung Wah Terrace, Palmerston or posted to:

Department of Governance and Strategy
City of Palmerston
PO Box 1
PALMERSTON, NT 0831

3. Response to your application

The Council will respond in writing to your application within 30 days of receiving it.

If aggrieved by the decision, you may apply for an internal review to which the Council has 30 days to respond. If unsatisfied with the review outcome you may lodge a complaint with the Information Commissioner within 90 days.

4. Decisions in relation to a request to correct personal information

The response to this application could inform you that the Council will:

- correct the information;
- correct the information but the correction is different from the one specified in your application*;
- refuse to correct the information*;
- require more time to make a decision; or
- transfer the application.

**If in your opinion the information as corrected (or not corrected) is inaccurate, incomplete or out of date, you are entitled to request that the statement to that effect be associated with the information. The Council is not required to correct personal information that is inaccurate due to historical reasons.*

ASSISTANCE

If you need help to complete this application form please contact the Department of Governance and Strategy, City of Palmerston, PO Box 1, Palmerston NT 0831, Telephone: (08) 8935 9922, Facsimile: (08) 8935 9900 or email: palmerston@palmerston.nt.gov.au

OFFICE USE ONLY

Reference Number: _____

Application Receipt Date: _____

Satisfied as to Identity of Applicant: _____

Yes No

Receiving Officer's Name: *(Please print)* _____

Signature of Receiving Officer: _____