GIPA Internal Review Application

northern beaches council

Government Information (Public Access) Act 2009

If you need help lodging your form, contact us			
Email	council@northernbeaches.nsw.gov.au		
Phone	1300 434 434		
Customer Service Centres	**Manly** Town Hall, 1 Belgrave Street, Manly NSW 2095	**Dee Why** Civic Centre, 725 Pittwater Road, Dee Why NSW 2099	**Mona Vale** 1 Park Street, Mona Vale NSW 2103

Office use only	
Form ID	3033
TRIM Ref.	
Last updated	Aug 2024
Business unit	Systems & Information
Application no.	

Privacy Protection Notice	
Purpose of collection	For Council to provide services to the community
Intended recipients	Northern Beaches Council staff
Supply	If you choose not to supply your personal information, it may result in Council being unable to provide the services you seek
Access/Correction	Please contact Customer Service on 1300 434 434 to access or correct your personal information

Government Information (Public Access) Act 2009

This form should be used if you wish to apply for internal review of a decision made under the Government Information (Public Access) Act 2009 (GIPA Act). You must lodge this form within 20 working days after notice of the decision was given to you.

If you need help in filling out this form, please contact Northern Beaches Council on 1300 434 434 or email council@northernbeaches.nsw.gov.au or visit our website at northernbeaches.nsw.gov.au and click on the Access to Information page.

Payment options	
In person	Visit one of our Customer Service Centres (listed above) to apply and pay over the counter:
Via post	Send the completed application form and cheque payment to: Northern Beaches Council, PO Box 82, Manly NSW 1655. Please allow extra time for this option.
Via email	Send the completed application form to council@northernbeaches.nsw.gov.au and we will call you for payment. Please allow extra time for this option and note the application is not assessed until payment is received.
Please note, all credit / debit card payments attract a 0.5% surcharge.	

Part 1: Applicant details

Title	Mr ◯ Mrs ◯ Ms ◯ Other:		
First name			
Last name			
Company name *(attached business card if relevant)*			
Address			
		Postcode	
Phone		Mobile	
Email			
I agree to receive correspondence to the aboe email address (please tick)		Yes ◯	No ◯

Part 2: Decision Details

Decision to be reviewed			
Date of decision			
File reference			
Applicant's Signature		Date	