



Government Information (Public Access) Act 2009 INTERNAL REVIEW APPLICATION (Form A17)

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 the Right to Information Officer, Internal Audit & Corporate Governance on (02) 4985 5980 or email HNELHD-AuditandLegal@hnehealth.nsw.gov.au

General information about accessing government information under the GIPA Act is available on the IPC's website: www.ipc.nsw.gov.au.

Your details

Surname:..... **Title:** Mr / Ms

Other names:.....

Postal address:..... **Postcode:**

Daytime telephone:..... **Facsimile:**.....

Email:.....

I agree to receive correspondence to the above email address.

Decision details

Would you like the entire decision reviewed?

Yes – what is the decision to be reviewed (s80 of the GIPA Act)?

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No – what particular aspect of the decision would you like reviewed? (s82(3) of the GIPA Act. *Please include in your internal review application the Notice of Decision.*

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Date of decision:.....File reference:.....

Applicant's signature:.....Date:.....

Please include your application fee of **\$40** when you post this form or lodge it at:
District Headquarters, Hunter New England Local Health District, Lookout Road, New Lambton NSW 2305

Office use only

Date application received:

File reference: