



1. Applicant details

Surname: _____ Given Names: _____

Date of Birth: _____ Title: (Mr/Ms etc): _____

Australian Postal Address: _____

Postcode: _____ Contact Number: _____

2. If applying for information concerning another person, please complete their details below

Surname: _____ Given Names: _____

Date of Birth: _____ Title: (Mr/Ms etc): _____

Australian Postal Address: _____

Postcode: _____ Contact Number: _____

NOTE: Written authority must accompany applications on behalf of individuals over the age of 16 years. If the individual is deceased, applications must be accompanied by written authority from the legal Next of Kin.

3. Describe the documents you wish to obtain (e.g. admission dates, subject matter or any other information which would help identify the document)

4. Which health service does your request relate to? Please tick

- Bentley Health Service
- Midland Community Mental Health Service
- Swan Districts Hospital Mental Health Service (closed)
- Other (specify) _____

5. Details of request Please tick

- Personal Documents (incurs no fees and will contain information pertinent to applicant only)
- Non-personal documents – (incurs \$30.00 application and associated charges and may, subject to the Act and/or consultation, contain information regarding third parties.)

6. Fees and charges (Non-Personal Applications)

Attached is a cheque/cash to the amount of \$ _____ to cover the application fee. I understand that before I obtain access to documents I may be required to pay processing charges in respect of this application and that I will be supplied with a statement of charges if appropriate

7. Method for collection Please tick

- Collect electronic copies (provided on USB) in person once advised documents are available
- Receive electronic copies (provided on USB) by post (please note that Bentley Health Service takes no responsibility for the safe delivery of mailed documents)

Applicant's signature: _____ Date: ____/____/____

Please send all applications to:
 Coordinator, Freedom of Information
 Bentley Health Service
 PO Box 158
 Bentley WA 6982