

DARLING DOWNS HOSPITAL AND HEALTH SERVICE

INFORMATION ACCESS UNIT

Application Kit for health records, employment and other government documents

You will find in this pack:

1. Frequently Asked Questions – AA, RTI/IP, General
2. Application Checklist
3. List of facilities within the Darling Downs Hospital and Health Service
4. Links to further information
5. Administrative Access Application Form
6. RTI/IP Application Form

The Darling Downs Hospital and Health Service acknowledges the work contained in the *Application Kit for Medical Documents and other Government Documents* by Gold Coast Hospital & Health Service.

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Please fill out ONE form only

If you are applying for:

your records	you fill out the Administrative Access Form
your child's records	you fill out the Right to Information/Information Privacy Form
someone else's records (e.g. deceased relative)	you fill out the Right to Information/Information Privacy Form
your employment records	you fill out the Right to Information/Information Privacy Form
non-personal government documents	you fill out the Right to Information/Information Privacy Form

You may also submit an online application through the Queensland Government Application Portal available at:

<https://www.smartservice.qld.gov.au/services/information-requests/home.action> *

*If you are seeking access to personal information you will be required to submit suitable identification documents with 10 business days of your application. These identification documents cannot be provided electronically.

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Administrative Access (AA)

Frequently Asked Questions

Q. What can I apply for under AA?

A. You may apply for any document relating to your medical treatment.

Q. Which form do I use to apply for my records under AA?

A. You use the *Application for Administrative Access to Health Records* form.

Q. Why do I have to provide identification? I've told you who I am.

A. Health information is considered confidential. The HHS has a responsibility to ensure that this information is being provided to the proper person.

Q. How long do I have to wait to get my records?

A. The AA policy allows the HHS 15 working days (3 weeks) to finalise your application. However the timeframe for processing your application may vary depending on:

- the amount of work currently being processed by the Information Access Unit (IAU)
- the amount of information you have requested (the more specific you are, the less time it may take to process your application)
- the availability of your medical record or the information you have requested (if you attend the HHS frequently the IAU has more difficulty in accessing your record).

Q. Is there anything I can do to speed this up?

A. The IAU receives around 500 requests per month and has limited resources. The IAU makes every attempt to process applications in a timely manner however is unable to provide more specific timeframes. The applications are generally processed according to order of receipt however if there is a specific date you need the records by, please mark this on your application form. The IAU will try and meet this deadline however no guarantees can be provided that you will receive the records by the specified date, particularly where the records are required at short notice.

If you require the documents for a court matter you should consider talking to your solicitor or the court about having the records subpoenaed to court. Please be aware that there are fees that need to be paid for us to provide the records to court.

Q. Do I get access to everything I have asked for under AA?

A. If access is granted under AA you will be provided with all the documents you have requested that the HHS has located. Where the HHS is not able to release all of the documents you have asked for, your application will be referred to the RTI/IP decision maker for processing.

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Right to Information (RTI) and Information Privacy (IP)

Frequently Asked Questions

Q. What can I apply for under RTI/IP?

A. You may apply for any document that is held by the HHS, however you may not be granted access to parts or all of the documents. If you are requesting access to a document that does not concern your personal affairs you may also be required to pay fees and charges. Please refer to the Summary of Fees and Charges for more information.

Q. Why do I have to provide identification? I've told you who I am.

A. Information concerning the personal affairs of an applicant is considered confidential and in the case of health information this confidentiality is particularly important. The HHS has a responsibility to ensure that this information is being provided to the proper person.

Q. If I go to my solicitor, will they get the information more quickly?

A. No. A solicitor may act as an agent for a person if they obtain the written consent of the individual; however they are subject to the same laws and regulations as the general public.

Q. My child needs access to their records but is too young to do it themselves. Can I do it for them?

A. The *Information Privacy Act 2009* (IP Act) provides a legal mechanism for a parent or guardian to apply for the records on behalf of their child. The applicant must be the child, i.e. the parent must be acting for the child and not seeking access for themselves. The HHS must make a decision that the release of this information is not contrary to the child's best interests.

Example where an application would not qualify:

- A father seeking access to the records of a child because he (the father) has been accused of abuse.

Example where an application may qualify:

- A child is bitten by a dog and the parent is accessing the records to make an application for compensation for the child.

Q. I'm a pensioner and can't afford to pay the application fee to make an RTI application.

A. Unfortunately the *Right to Information Act 2009* (RTI Act) requires the application fee to be paid. The legislation specifically states that the application fee cannot be waived. However, you may apply for a fee waiver in relation to the processing and photocopying charges that may be applicable.

Q. I want information about my mother who has been dead for 20 years. Why do I need to tell you my reasons for requesting this information?

A. An individual's health information is considered confidential to that person. The officer at the HHS who makes the decision for the application must balance the right to confidentiality of the individual who the information is about with that of the public benefit in releasing the information. This applies equally to patients who are deceased.

Q. Why does it take 25 business days (5 weeks) to get the information?

A. Under the RTI/IP Acts the HHS is allowed 25 business days (5 weeks) to process a request. The HHS is allowed an additional 10 business days if consultation is required in relation to the information. While every effort is made to process applications quickly and efficiently this is a formal process and certain steps must be taken prior to the release of any information.

Q. It's been more than 5 weeks since I submitted my application, what do I do now?

A. A standard application may take around 25 business days however there are other factors that will impact on the actual time taken for your request. The calculation of time is complex and depends on the type of application, if any public holidays fall within the processing time and the steps involved in processing your application. To obtain more detailed information about the calculation of time, please contact the IAU.

If, after speaking with the IAU, you believe the HHS is out of time, you may apply directly to the Office of the Information Commissioner for a review of the process.

General

Frequently Asked Questions

Q. Why does it take so long?

A. The Darling Downs Hospital and Health Service covers a large geographical area and utilises offsite storage in many areas. There may also be multiple records that need to be collected. It can take some time for all of the records to be available. As the HHS moves to more electronic systems these independent systems also need to be checked to make sure all of your documents are filed in your record. Once the records are received the officer processing your application will need to review your record to identify which pages need to be copied. The officer then needs to photocopy the relevant pages and check that they are copied correctly. Your records are then posted to your address by registered mail to protect your privacy.

Q. I have attended multiple hospitals with the Darling Downs Hospital and Health Service. Do I need to apply to each one?

A. You can include multiple hospitals in your application however we are only able to process applications for the Darling Downs Hospital and Health Service. It is important to be specific in your application if you require documents from other facilities so that we can locate the records in a timely manner. If you need documents from another government department or HHS you will need to apply separately to them.

Q. Where do I send my application form?

A. Please address your application to:

Information Access Unit
Toowoomba Health Service
PMB 2
TOOWOOMBA QLD 4350

Q. Can I collect my records?

A. Due to the volume of work in the IAU it is not advisable to pick up your records. However if you are anxious to pick them up please identify this on your form and an information access officer will ring and make arrangements with you for collection.

Q. I'm still not sure what I have to do?

A. If you still have questions after reading this document, please contact the IAU on 4616 6780.



APPLICATION CHECKLIST

**CHECK THAT YOU HAVE EVERYTHING YOU NEED BEFORE SUBMITTING YOUR FORM
(please attach this form to your application)**

- I have selected the correct form
- I have filled in all required details on the form
- I have signed and dated the form
- I have attached this form to my application

SUBMITTING THE FORM

- I have provided one of the identity documents listed below that contains the original signature of a Commissioner for Declarations or a Justice of the Peace indicating that the copy is a true copy of the original document.

- | | |
|---|---|
| <input type="checkbox"/> Driver's licence | <input type="checkbox"/> Identifying page of current passport |
| <input type="checkbox"/> Medicare or health benefits card | <input type="checkbox"/> Naturalisation certificate or citizenship certificate |
| <input type="checkbox"/> Birth certificate or certified extract from birth register | <input type="checkbox"/> Immigration papers or other documents issued by the Commonwealth Department of Immigration |
| <input type="checkbox"/> Marriage certificate | |

Mail to: Information Access Unit
Toowoomba Health Service
PMB 2
TOOWOOMBA QLD 4350

Or

- I have presented to Health Information Services, Level 2 Emma Webb Building, Toowoomba Health Service and presented my identification to the information access officer.
- I have presented to the administration section of my local hospital within the Darling Downs Hospital and Health Service and presented my identification to the administration officer.

Please complete the list of facilities you wish to include as part of your application over the page.

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List of facilities within the Darling Downs Hospital and Health Service

Please identify those facilities you wish to include in your application

- Baillie Henderson Hospital
- Cherbourg Health Service
- Chinchilla Health Service
- Dalby Health Service
- Glenmorgan Outpatients Clinic
- Goondiwindi Health Service
- Inglewood Multipurpose Health Service
- Jandowae Health Service
- Kingaroy Health Service
- Meandarra Outpatients Clinic
- Miles Health Service
- Millmerran Multipurpose Health Service
- Moonie Outpatients Clinic
- Murgon Health Service
- Nanango Health Service
- Oakey Health Service
- Stanthorpe Health Service
- Tara Health Service
- Taroom Health Service
- Texas Multipurpose Health Service
- Toowoomba Health Service
- Wandoan Outpatients Clinic
- Warwick Health Service
- Wondai Health Service

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LINKS TO FURTHER INFORMATION

Application Portal	https://www.smartservice.qld.gov.au/services/information-requests/home.action
Fees and charges	http://www.rti.qld.gov.au/fees-and-charges
Evidence of identity	http://www.oic.qld.gov.au/guidelines/for-community-members/information-sheets-access-and-amendment/how-to-make-an-application-under-the-ip-act-a-guide-for-applicants
<i>Right to Information Act 2009</i>	https://www.legislation.qld.gov.au/LEGISLTN/CURRENT/R/RightInfoA09.pdf
<i>Information Privacy Act 2009</i>	https://www.legislation.qld.gov.au/LEGISLTN/CURRENT/I/InfoPrivA09.pdf
Office of the Information Commissioner	http://www.oic.qld.gov.au/
Department of Health RTI/IP Information Page	http://www.health.qld.gov.au/system-governance/contact-us/access-info/rti-application/default.asp

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APPLICATION FOR ADMINISTRATIVE ACCESS TO HEALTH RECORDS

*For office use only
(Attach Patient ID Label)*

DETAILS OF APPLICANT (Please print)

Full Name	Title (Mr/Mrs/Ms etc)	Surname/ Family Name		
	Given Names		Date of Birth (dd/mm/yy)	
Name used in records (If records requested are under a different name than above, please provide details):				
Postal Address				
	Suburb/Town			Postcode
Tel (Home)	(Work)	(Mobile)	E-Mail	

DETAILS OF APPLICATION

It will help us locate the documents without unnecessary delays if you can provide as many details about the documents as possible, including: in what name they are held (eg. under a maiden name); the hospital or health facility where they are held; the date(s) of treatment to which the application applies.

I REQUEST ACCESS TO THE FOLLOWING DOCUMENTS:

<input type="checkbox"/> IN-PATIENT HOSPITAL NOTES	<input type="checkbox"/> OUT-PATIENT NOTES	<input type="checkbox"/> COMMUNITY HEALTH SERVICE NOTES	<input type="checkbox"/> X-RAYS; MRI SCANS, ETC	<input type="checkbox"/> LABORATORY REPORTS
(Approximate dates of records requested): _____				
<input type="checkbox"/> RECORDS OF TREATMENT ARISING OUT OF MOTOR VEHICLE ACCIDENT ON _____ (Date)				
<input type="checkbox"/> OTHER (Please specify): _____				

EVIDENCE OF IDENTITY

<p>Before access to personal information can be given, you must provide suitable evidence of your identity. (see over for acceptable forms of documentation)</p> <p>Evidence of identity documentation accompanies this form.</p> <p style="text-align: center;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>If you are requesting personal information in respect of another person, <u>the written consent of that person is also required.</u></p> <p>A copy of the person's written consent accompanies this form.</p> <p style="text-align: center;"><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
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PRIVACY NOTICE: Personal information supplied in the course of an application may be used or disclosed in order to deal with the application, and with any review or complaint arising from the application.

SIGNED: _____ **DATE:** _____

NOTE: DOCUMENTS WILL NORMALLY BE AVAILABLE WITHIN 15 WORKING DAYS AFTER RECEIPT OF COMPLETED APPLICATION AND CONFIRMATION OF IDENTITY/CONSENT. YOU WILL BE NOTIFIED IF THAT DEADLINE CANNOT BE MET.

EVIDENCE OF IDENTITY

To protect patient privacy, satisfactory evidence of identity is required before you can be given access to health information. This can be established by providing one of the following identity documents:

- | | |
|--|---|
| <input type="checkbox"/> Driver licence
<input type="checkbox"/> Medicare or health benefits card
<input type="checkbox"/> Birth certificate or certified extract from birth register
<input type="checkbox"/> Marriage certificate | <input type="checkbox"/> Identifying page of current passport
<input type="checkbox"/> Naturalisation certificate or citizenship certificate
<input type="checkbox"/> Immigration papers or other documents issued by the Commonwealth Department of Immigration. |
|--|---|

IF APPLYING IN PERSON: Bring an **original** identity document, for sighting/verification by a departmental officer.

IF APPLYING BY MAIL: Send with your application a photocopy of one of the identity documents listed above. Copies provided will be securely destroyed once Queensland Health is satisfied as to your identity.

NOTE: The photocopy must bear the **original** signature of a Commissioner for Declarations or a Justice of the Peace (JP), certifying the photocopy to be a true copy of the original document, which they have sighted. Documents that bear a photocopied or facsimile copy of the certification/signature will not be accepted.

DO NOT SEND ORIGINAL IDENTITY DOCUMENTS THROUGH THE MAIL.

FOR OFFICE USE ONLY

Date received		Officer's Signature	
Identity confirmed	<input type="checkbox"/> YES	Officer's Signature	Date
Type of ID provided			<input type="checkbox"/> NO
Consent verified	<input type="checkbox"/> YES	Officer's Signature	Date
← If "NO", application is refused			
 <input type="checkbox"/> PROCESSED UNDER ADMINISTRATIVE ACCESS			
Release authorised by	Officer's Name	Officer's Signature	Date
Documents released by	Officer's Name	Officer's Signature	Date
Method of release	<input type="checkbox"/> Personal attendance		<input type="checkbox"/> Registered Mail - Acknowledgment of receipt
	(Applicant's Signature) _____		(Attach receipt) →
 OR			
<input type="checkbox"/> REFERRED FOR PROCESSING UNDER RIGHT TO INFORMATION / INFORMATION PRIVACY ACTS			
Referred by	Officer's Name	Officer's Signature	Date
Reason for referral			

This completed form should be placed on the patient's file as a record confirming the details of access granted.

Right to Information and Information Privacy Access Application

Right to Information Act 2009 (Section 24)
Information Privacy Act 2009 (Section 43)

Please read the following information carefully before proceeding with your application.

It is recommended that you contact the **RTI officer** in the relevant agency for assistance and advice **before** completing and submitting this application form.

The information you are seeking may be already available online, for purchase or by request:

- Online** – a search of the relevant agency websites may locate the information you are seeking;
- For purchase** – agencies may offer documents for purchase (for example: birth certificates, transcripts of proceedings, spatial statistics);
- By request** – agencies may administratively release a range of information upon request.

If you wish to make a formal application to access documents under the *Right to Information (RTI) Act 2009* or the *Information Privacy (IP) Act 2009* the application must be submitted on this approved form.

This form is available at www.rti.qld.gov.au and on some agency websites.

RTI Act or IP Act?

You may apply under the *IP Act* if

- all of the documents you are applying for contain your personal information
- OR
- you are acting on behalf of another person, and all of the documents contain that person's personal information.

You should apply under the *RTI Act* in all other cases. If in doubt, contact the RTI officer of the agency to which you are applying.

Fees and charges

There is an application fee under the *RTI Act*, and you may also have to pay processing and access charges.

There is no application fee and there are no processing charges under the *IP Act*, although you may have to pay access charges. For further information about fees and charges, see www.rti.qld.gov.au or contact the agency you're applying to.

Note: ▲ denotes **Mandatory** field.

Contact Details

You are required to supply your name and an address for correspondence. Additional contact details will help us to deal with your application, and to correspond with you in the manner you prefer. If you are applying on behalf of another person, please complete this section with your contact details.

Title (e.g. Mr, Mrs, Ms, Miss) **Given name/s**

Family name

▲ ▲ ▲

Organisation / Company name (complete if you are making this application on behalf of an organisation or company)

Postal address

▲ **Postcode:**

Preferred method of contact (Please indicate by numbering in order of preference, your preferred method of contact. If you choose email or post, please also provide a contact telephone number. The agency may need to telephone you to clarify aspects of your application. Please include country code and area code, where applicable).

Phone **Fax** **Mobile** **Email** **Post**

▲

Great state. Great opportunity.



Application Details

1. Which description most closely describes your application for access?

- a. All of the documents I'm applying for contain my personal information OR I'm seeking access on someone else's behalf, and all the documents contain that person's personal information – **IP application, no application fee.**
- b. Some of the documents I'm applying for do not contain my personal information OR I'm seeking access on someone else's behalf, and some of the documents do not contain that person's personal information – **RTI application, application fee payable.**
- c. None of the documents I'm applying for contain my personal information OR I'm seeking access on someone else's behalf, and none of the documents contain that person's personal information – **RTI application, application fee payable.**

2. Are you seeking access to information on someone's behalf?

No

Yes **Person's family name** **Given name/s**

.....

Please attach **proof of your authorisation to act on the person's behalf.**
(for example: a client agreement if you are a solicitor or written authorisation from the person concerned).

3. If you ticked 1(b) or 1(c) only: are you seeking access for the use or benefit of another person, company or body?

(for example, a journalist applying for a media organisation)

▶ No Yes

4. If you answered yes to question (3) above, what is the name of the other person, company or body?

▶

5. Which agency/s are you applying to?

You must complete a separate form for each agency and there is a separate fee for each RTI application.

▶

6. Particular details:

Please provide specific and detailed information about the documents you are seeking, as this will help us process your application.

a. The subject matter of the documents you are seeking (e.g. the planning process for the Letter Z Program)

▶

b. The type of documents (e.g. internal memos, emails)

.....

c. The time period / date range you would like us to search within (e.g. September 2011 - June 2012)

.....

d. Relevant document reference numbers (if known)

.....

SPLES10785_V07 June 2013 / Form 1 RTI-IP

e. Where you think the documents may be located (e.g. facility, business area, unit, person)

f. Any other details you believe will assist us in dealing with your application Note: Include additional information that the agency requires in the space provided or as an attachment to your application (e.g. date of birth will assist in locating relevant files to distinguish you from someone with the same name)

7. Preferred access type (tick one):

Note: Your preferred access type may not be available. If you choose to access documents by email, CD, DVD or inspection, there will be no charge for this access.

- Inspect document/s Photocopy of document/s (charges may apply) Document/s sent to me by email
 Copy of the document/s on DVD Copy of the document/s on CD

Note: Information that is released following an application under the RTI Act, and is not the applicant's personal information, may be published in an online disclosure log. See privacy notice.

8. Evidence of identity

If you are seeking access to documents that contain personal information either in relation to you or on behalf of another person, you must provide evidence of your identity with this application or within 10 business days of making this application in order for your application to be processed. If you are seeking documents on someone's behalf, both parties must provide evidence of their identities. (If you are not seeking any personal information, you are not required to provide evidence of your identity.)

Applying:

by post — attach a **certified copy** of your identification document to this application form.

in person — produce the original identification document for the RTI officer to sight.

by email or fax — post or present a **certified copy** of the identification document to the relevant agency to which you are applying for information. (A certified copy is considered valid if it is witnessed by a lawyer or notary public, a commissioner for declarations or a justice of the peace or in the case of a prisoner, a corrective services officer. *refer note below*)

Note: Documents that provide sufficient evidence of identity include:

- Current driver's licence
- Identifying page of current passport
- Birth certificate
- Copy of a prisoner's identity card certified by a corrective services officer
- Statutory declaration of an individual who has known the applicant for at least one year (A declaration template can be downloaded at www.court.qld.gov.au/forms).

9. Financial hardship

Concession card holders - Application for financial hardship must be made in writing to the relevant agency. If you hold a valid concession card, and you are seeking a waiver of processing and access charges, you must show RTI officer your card (or attach a copy of the card to your application).

Note: Not all concession cards are accepted. Please contact the RTI officer to be sure your card qualifies.

Non-Profit organisations - If you have **financial hardship status**, you must provide the RTI officer with a copy of the notice from the Office of the Information Commissioner showing that financial hardship status has been granted.

Note: If you are a non-profit organisation and have sought financial hardship status under the RTI Act, do not submit this application until you have advice from the Office of the Information Commissioner about whether financial hardship status has been granted. If financial hardship status is granted, this status will remain current for one year from the date of the Information Commissioner's decision, unless there is a substantial improvement in your organisation's financial circumstances.

10. Credit card payments

Not all agencies can accept credit card payments. Please confirm with the agency you're applying to that it can accept credit card payments before completing this section of the form (see next page).

Declaration

Privacy Notice: The information you provide on this form will be used by the agency you have applied to, to deal with your application as set out in the *Right to Information Act 2009* or the *Information Privacy Act 2009*.

If you have applied under the RTI Act to a department or Minister only: Once the department or Minister receives your valid application, the date you applied and what you are applying for will be published online in their disclosure log. If the department or Minister gives you access to a document, and if the document contains no personal information about you, the document will be published online in the department or Minister's disclosure log, along with your name and, if another person, company or body will use or benefit from the documents sought, the name of that person, entity or body. The department or Minister may remove some information from the document before it is published—for example, information that may be defamatory.

If you have applied to an agency other than a department or Minister, documents which do not include your personal information may be published on a disclosure log.

I declare that:

- The information provided in this form is complete and correct
- I have read the privacy notice
- Where applicable, I have attached documents required for the purpose of this application
(e.g. *evidence of identity, authorisation to act on another person's behalf, evidence of financial hardship status*)
- If I cannot attach any required copies of documents, I will provide them to the agency within **10 business days** of making this application
- I have included any relevant application fee/s (*fees are based on the type of application, see section 1*)

I understand that it is an offence to give misleading information about my identity, and that doing so may result in a decision to refuse to process my application.

Signature

Date

..... / /

Office Use Only

Date received RTI Ref / IP Ref
 ____ / ____ / ____

Application Fee Received No Yes Date ____ / ____ / ____

Satisfied as to Identity of Applicant No Yes Date ____ / ____ / ____

Identity Document Sighted No Yes Date ____ / ____ / ____

Receiving Officer (print name)

Decision Maker Assigned to Application (print name)

Mastercard/Visa Authority

Expiry Date Card number Amount
 / \$

Cardholder's name Cardholder's signature
