**ACCESS TO INFORMATION REQUEST FORM**

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| **Applicant (name and surname / name, address / telephone and / or e-mail)** | | | |
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|  |  |  |  |
| **Name of public authorities / office and address** | | | |
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|  |  |  |  |
| **The information that is requested** | | | |
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|  |  |  |  |
| **The manner of access to information***(mark)* | | | |
| ☐ direct access to information  ☐ access to the information in writing  ☐ access to documents and making copies of documents containing the requested information  ☐ supply of copies of documents containing the requested information  ☐ in some other way (electronically or otherwise) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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(signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
          (place and date)

Note: The public authority has the right to compensation for actual costs incurred by the applicant in connection with the provision of the information requested.