



APPLICATION FOR INFORMATION UNDER
THE FREEDOM OF INFORMATION ACTS, 1997 AND 2003

Date of Request:

Name of person requesting information:

Contact Numbers:

Home:

Work:

Type of Identification*

(please select one; only send a copy please, do not send the original):

Birth Certificate Driver's Licence Passport Social Welfare Card

**Note:* If your request is for personal information, you must provide some means of identification. If you don't provide ID, there will be a delay in processing your application.

Details of Request

Please give as much detail as possible about your request. Please include the dates within which the information you're requesting is relevant.

Name:

Address:

Request:

If a solicitor is acting on your behalf, please provide their contact details below:

Solicitor's Name:

Address:

Telephone:

Fax:

If you need help in completing the application form, please contact us at:

Freedom of Information Unit
Léargas
189 Parnell St
Dublin 1
(01) 873 1411