



## FOI Application Form

(Request for Access to Records held by The Office of Tobacco Control - Section 7 of the FOI Acts)

### Details of Applicant

Please use BLOCK letters

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Telephone Number(s): Home: \_\_\_\_\_

Business: \_\_\_\_\_

### For Office Use Only

Date FOI Request Received: \_\_\_\_\_

Identity Verified

Consent Confirmed

Form of identity produced:

Birth Certificate

Driving Licence

Passport

Other: \_\_\_\_\_

### Personal Information

Before you are given access to personal information relating to yourself, you may be asked to produce your birth certificate, driving licence, passport or other form of identity.

### Form of Access

My preferred form of access is: (please tick as appropriate)

to receive copies of the records by post

other – (please specify) \_\_\_\_\_

**Details of Request**

Please use BLOCK letters

In accordance with section 7 of the FOI Acts, I request access to records, which are:

*(Please tick as appropriate)*

Personal

Non-personal

(In the space provided **please describe the records as fully as you can**, as this will assist The Office of Tobacco Control's FOI personnel in dealing with your application. If you are requesting personal information, please state precisely in whose name those records are held. You will not normally be given access to the personal information of another person unless you have obtained the written consent of that person. **If you require more space to complete your description of records please attach a page.**)

I request the following records:

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PLEASE SIGN HERE: \_\_\_\_\_

DATE: \_\_\_\_\_

Your application should be addressed to:

Freedom of Information Officer  
Office of Tobacco Control  
Willow House  
Millennium Park  
Naas  
Co Kildare

Email           foi@otc.ie  
Fax               045 852799  
Telephone       045 852700

**Fees**

The Guide to the Functions and Records of the Office of Tobacco Control (paragraph 1.8) outlines when fees are required. Please read this document before submitting your request.

**Assistance**

If you require any assistance in completing this form please contact The Office of Tobacco Control at the address above. The FOI Officer is also available to provide assistance to persons with a disability to exercise their rights under the FOI Acts (e.g. accepting oral requests from requesters who are unable to read, print and/or write due to their disability, enabling the requester to inspect or have records explained to him or her).