



Forestry Development Authority

Public Affairs Department

Freedom of Information Request Form



Date: _____

1. Name: _____

Surname

Middle Name

First Name

2. Name of Institution: _____

3. National Institution: International Institution:

4. Area of business: _____

5. Physical Address: _____

6. Phone #: _____ email: _____

7. I would like to access the following document (s) / information:

a) _____

b) _____

c) _____

d) _____

8. Indicate whether you would like to inspect the documents and/or obtain a copy of the documents:

a) I want a copy of the document (s) I want to inspect the document (s)

Signed By: _____