

FORM: PRIVACY COMPLAINT: INTERNAL REVIEW APPLICATION

Privacy and Personal Information Protection Act 1998 OR Health Records and Information Privacy Act 2002

Port Macquarie-Hastings Council
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pmhc.nsw.gov.au

Privacy Notification (Privacy and Personal Information Protection Act 1998 – Section 10) - Personal information collected in this application is considered personal or health information for the purposes of the Privacy and Personal Information Protection Act 1998 (PPIPA). Information provided will only be used for the purpose for which it is collected. The intended recipients of the personal information are Council officers and may extend to any person wishing to inspect the application in accordance with the Local Government Act 1993 or the Government Information (Public Access) Act 2009. The supply of this information is voluntary, however if you do not wish to provide all details requested, Council may be unable or limited in dealing with your request. You may make application to access, amend or suppress your personal information which Council will consider in accordance with the PPIPA.

About this form

Use this application¹ for review of conduct under section 53 of the [Privacy and Personal Information Protection Act 1998](#) (PIPA Act) or section 21 of the [Health Records and Information Privacy Act 2002](#) (HRIP Act).

How to complete this form

- 1 Complete as many fields as possible to allow Council to fully investigate your complaint.
- 2 Once completed please refer to the lodgement details section for further information.

SECTION 1 APPLICANT DETAILS		
Title	Surname	Other Names
Postal Address		
Phone	E-mail	
I agree to receive correspondence at the above email address. <input type="checkbox"/> Yes <input type="checkbox"/> No		
If the complaint is on behalf of someone else, please provide their details		
Title	Surname	Other Names
Postal Address		
Phone	E-mail	
What is the applicant's relationship* to this person? <input type="checkbox"/> Parent of a child under 18 years of age <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Other (please specify) _____ <input type="checkbox"/> Guardian		
* Please provide documentary evidence of legal authority to deal with the matter.		
Is the person capable of making the complaint by him or herself? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure		

¹ It is not a requirement under the PPIPA Act or the HRIP Act that you complete an application form. This form is designed for your convenience only. However, you must make a written request in some form to Council for the matter to be a valid internal review.

SECTION 2 DETAILS OF THE COMPLAINT

I request a review of conduct under: (please tick one)

- section 53 of the Privacy and Personal Information Protection Act 1998 (PIIP Act)
- section 21 of the Health Records and Information Privacy Act 2002 (HRIP Act)

What is the specific conduct² you are complaining about? (see footnote for explanation of “conduct”)

Please tick which of the following describes your complaint: (you may tick more than one option)

- Collection of my personal or health information
- Security or storage of my personal or health information
- Refusal to let me access or find out about my own personal or health information
- Accuracy of my personal or health information
- Use of my personal or health information
- Disclosure of my personal or health information
- Other

On what date did the conduct occur? (please be as specific as you can)

On what date did you first become aware of this conduct? (please be as specific as you can)

You need to lodge this application within six months of the date on which you first became aware of the conduct.

If more than six months has passed, you will need to request special permission to lodge a late application. Please explain why you have taken more than six months to make your complaint (e.g. *I had other urgent priorities – list them, or while the conduct occurred more than six months ago, I only recently became aware of my privacy rights etc.*):

What effect did the conduct have on you?

What effect might the conduct have on you in the future?

What would you like to see Council do about the conduct? (e.g. *an apology, a change in policies or practices to ensure that the conduct will not occur again, the payment of monetary compensation to the applicant etc.*)

² “Conduct” can include an action, a decision, or even inaction by the agency. For example the “conduct” in your case might be a *decision* to refuse you access to your personal information, or the *action* of disclosing your personal information to another person, or the *inaction* of a failure to protect your personal information from being inappropriately accessed by someone else.

SECTION 3 APPLICANT DECLARATION

I understand that this form will be used by Council to process my request for an internal review. I understand that details of my application will be referred to the Privacy Commissioner in accordance with: section 54(1) of the Privacy and Personal Information Protection Act; or section 21 of the Health Records and Information Privacy Act; and that the Privacy Commissioner will be kept advised of the progress of the internal review, and that the Privacy Commissioner may make submissions.

Applicants should also be advised that if the review is not completed within 60 days from the day on which the application was received, the applicant is entitled to a review by the NSW Civil and Administrative Tribunal (NCAT).

Signature:

Date:

SECTION 4 OFFICE USE ONLY

Date Received:

Reference Number:

LODGEMENT DETAILS**You can lodge the completed application by:**

Post The Public Officer, Port Macquarie Hastings Council, PO Box 84, Port Macquarie NSW 2444
In Person Customer Service Offices - Burrawan St Port Macquarie, Laurie St Laurieton , High St Wauchope
Email council@pmhc.nsw.gov.au
What now? Once your application is received, Council will acknowledge your application within 10 workings days, with the review completed within 60 working days in most instances.

FURTHER INFORMATION

General information about the *PIIP Act* and *HRIP Act* is available by calling the Office of the Information and Privacy Commissioner on freecall 1800 472 679 or at its website: www.ipc.nsw.gov.au.