



Information Request
Department of Special Investigation

For the official only
No. of the receipt
Date of the receipt

1. The requesting person's personal information

1.1 Name: Mr. Mrs. Miss Other (rank)

Career: Agency:

1.2 Other (General people/Student) ID no.

1.3 Place of contact (currently)

Telephone: Fax:

2. Information requested from the Department of Special Investigation

- Information under Section 7
Information under Section 9
Other information, please specify the type of requested information

Purposes of the request

- For checking
For photocopying sheet(s)
For certified copy set(s)

3. Benefits from the requested information or the certified copy (if any)

(signed) Requester

( )

Date: Month: Year:

Opinion of the Official of the Information Center, Department of Special Investigation

Dear Director of the Central Administration Bureau,
For your consideration,
(signed)
Head of Information Center

Dear Director-General, Department of Special Investigation,
Information requested by the requester is deemed appropriate
To approve/allow
To disapprove/disallow
To assign to an agency named
Signed:
Director, Central Administration Bureau
The DSI's Official Information Board