# SAFEWORK NSW PRIVACY COMPLAINT: INTERNAL REVIEW - APPLICATION

## FEBRUARY 2018

This is an application<sup>1</sup> for review of conduct under: (mark one box only)

s53 of the *Privacy and Personal Information Protection Act 1998* (PPIP Act) – relates to personal information

s21 of the *Health Records and Information Privacy Act 2002* (HRIP Act) – relates to health information ition explosives type 2.

ADDITIONAL DETAILS				
APPLICANT DETAILS				
Title	Family/Su	rname	Daytime contact number	Mobile number
Given name			Email	
Other nam	nes			
POSTAL	_ ADDRE	SS		
Unit number/Street number/Property number (include Lot or DP number if applicable)		Suburb		
(include Lot	t or DP numb	рег іт арріісаріе)	Suburb	
Street name		State	Postcode	
THE CO	MPLAIN	T		
If the complaint is on behalf of someone else, please			What is the specific conduct <sup>2</sup> you are complaining	
provide their details and proof that you have legal about authority to deal with the matter ie guardianship or			about? (see footnote for explanation of 'conduct')	
power of attorney or certified authorisation signed by the person that allows us to communicate with you on				
their behalf (including collecting and disclosing their				
personal and health information if relevant).				
What is your relationship to this person? (eg parent)				
Is the pers	son capable	e of making the complaint by		
themself?				
Yes	No	Unsure		

<sup>1</sup> It is not a requirement under the PIPP Act or the HRIP Act that you complete an application form. This form is designed for your convenience only. However, youmust make a written request in some form to the agency for the matter to be valid for an internal review.

<sup>2 &#</sup>x27;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 you personal information from being inappropriately accessed by someone else.

Please mark which of the following describes your complaint: (mark appropriate boxes)

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 Unsure

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

When did you first become aware of this conduct (date)?

You need to lodge this application within six months of the date the alleged conduct occurred.

If more than six months has passed, you will need to ask SafeWork NSW for special permission to lodge a late application.

Please explain why you have taken more than six months to make your complaint (for example: 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 SafeWork NSW do about the conduct? (for example: an apology, a change in policies or practices, your expenses paid, damages paid to you, training for staff, etc)

I understand that this form will be used by SafeWork NSW to process my request for an internal review. I understand that the details of my application will be referred to the Privacy Commissioner in accordance with: section 54(1) of the PPIP Act; or section 21 of the HRIP Act; and that the Privacy Commissioner will be kept advised of the progress of the internal review.

Applicant's signature

Date (DD/MM/YYYY)

### **PROOF OF IDENTITY** ■

When seeking access to any person's personal and/or health information (including your own), an applicant must provide proof of identify in the form of a certified\* copy of any one of the following documents:

Australian driver's licence (with photograph, signature and current address)

Current Australian passport

Other proof of signature and current address details

## FURTHER INFORMATION

#### **AGENCY CONTACTS AND FORM RETURN ADDRESS**

Please address completed forms to the Privacy Officer at the following address:

SafeWork NSW Privacy Officer Locked Bag 2906 Lisarow NSW 2252

Phone: 13 10 50 (Toll free) privacy@safework.nsw.gov.au

#### **KEEP A COPY FOR YOUR RECORDS**

For more information on the PPIP Act or the HRIP Act visit the Information and Privacy Commissioner's website www.ipc.nsw.gov.au or by telephone on 1800 472 679.

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<sup>\*</sup> Certified means that your proof of identify must be verified (ie signed and dated) by an authorised person (eg Justice of the Peace, doctor, teacher, pharmacist, legal practitioner, Postmaster - Australia Post).