

OFFICE USE ONLY Register No: #

Date: / /

PUBLIC INTEREST DISCLOSURE LODGEMENT FORM

Public Interest Disclosure Act 2003

The Shire of Plantagenet strongly encourages anyone thinking about making a public interest disclosure to seek out a nominated proper authority to discuss their issues first. Our proper authority(ies) (Public Interest Disclosure (PID) Officer(s)) are:				
Position				
Name of PID Officer				
Contact details				
Ensure you understand your rights and responsibilities under the <i>Public Interest Disclosure Act 2003</i> (PID Act) before you sign this lodgement form. You may wish to seek external legal advice about those rights and responsibilities. Lodge your public interest disclosure form with the Shire of Plantagenet's proper authority (PID Officer), not the Public Sector Commission.				
Personal details				
Family name				
Given name				
Title	☐ Mr ☐ Ms ☐ Mrs ☐ Dr ☐ Other			
Address				
Work phone				
Mobile				
Email				
	 I wish to make an anonymous public interest disclosure. I understand that: I will not receive any information about what happens to this disclosure it may be more difficult for the proper authority to look into the matter(s) as they cannot come back to me for further information it may be more difficult for the proper authority/public authority to protect me this anonymous disclosure may not prevent me from being identified during any investigation or when action is being taken. 			



Categories of public interest information Tick relevant box(es)						
Improper conduct						
An offence under written State law						
Substantial unauthorised or irregular use of, or substantial mismanagement of, public resources						
Conduct involving a substantial and specific risk of injury to public health, or prejudice to public safety or harm to the environment						
Administration matter(s) affecting you personally						
Disclosure details						
Name of the public authority(ies) the disclosure relates to						
Do you work for a public authority?	☐ Yes ☐ No If yes, which public authority and what is your position title?					
Does the disclosure relate to one or more individuals?		No e name(s) and position(s) held by person(s) rity	in the			
When did the alleged events occur?						
Summary of the matters to disclose						
Additional information						
Description of any provided or names of						
Have you report information to any ot or agency?	_	□ Yes □ No				
If yes, did you r information as a Pub Disclosure matter?	eport this	☐ Yes ☐ No f yes, please provide details				



You should read the following information and sign this form prior to lodgement.

ACKNOWLEDGEMENT

I believe on reasonable grounds that the information contained in this disclosure is or may be true.

I have been informed and I am aware that:

• I will commit an offence under section 24 of the PID Act, if I know that the information contained in this disclosure is false or misleading in a material particular, or I am reckless as to whether it is false or misleading in a material particular.

Penalty: \$12 000 or imprisonment for one (1) year.

- I will forfeit the protection provided by section 13 of the PID Act, if I fail, without reasonable excuse, to assist a person investigating the matter by supplying requested information (s17).
- I will forfeit the protection provided by section 13 of the PID Act, if I subsequently disclose this information to any person other than a proper authority under the PID Act (s17).
- I will commit an offence, if I subsequently make a disclosure of information that might identify or tend to identify anyone as a person in respect of whom this disclosure has been made under the PID Act, except in accordance with section 16(3) of the PID Act.
- Penalty: \$24 000 or imprisonment for two (2) years.
- I cannot withdraw my disclosure after I have made it.

Authorisation		
Discloser's signature		
Date		