Part 2	Part 3
Comment of the coordinating official	Authorizer's order
	[] Approved
To	[] Not Approved
The requested information is under the responsibility of	[] No information as requested
division of which is	Reason,
[] general information	
Name of authority	***************************************
- The information must be certified by a person whose position is practitioner level or higher	
[] information requested as per court's order	
- Authorizer is Director-General, Department of Local Administration	
- The information must be certified by a person whose position is	
professional level or higher	Signed
	(
Sincerely yours,	
	Position
Signed	
<u>(</u>)	
Coordinating Official	
Date/	
	•