

## Archives ACT Application for permission to publish Crown copyright items: Commercial publications

Attention: Agency Copyright Officer

## Description of Crown copyright records requested to be published

		Archives ACT Use Only		
Series No., File No. or medium type	Folio nos., item no. and / or description	Approved	Not Approved	
Total				

Address ArchivesACT GPO Box 158 Canberra ACT 2601

Canberra ACT 2601
Email: archives@act.gov.au

Senior Advisor, Information Access: (02) 6207 5726 Archives Officer: (02) 6205 3510

## Details of proposed publication or exhibition

	•	•	•						
	Book		Video / Film		News	paper		Exhibition	
	Journal		Television		Lectur	re		CD Rom / Internet	
Author/Director/Curator			Title of publication/exhibition						
Publisher				Date of publication/exhibition					
How many copies				Duration of exhibition					
Re	equested by	/							
Name						User IE	)		
Postal a	address								
Phone									
Email									
Terms	and conditions	s of use							
Permission to reproduce or publish Crown material must be sought from the government agency owning the copyright									
Owner agencies reserve the right to refuse permission to reproduce any item									
Declara	ation								
I undert	ake to publish t	he repro	duced material only	y in a no	t-for-pro	ofit publica	ation		
I agree to acknowledge that copyright in the reproduced material resides in the Australian Capital Territory.									
I agree to acknowledge the source of the material in the form specified by Archives ACT									
I understand that I may not make further reproductions without the written consent of Archives ACT									
I agree	to lodge 1 copy	of the p	ublication (or exhib	ition cat	alogue)	with the	ACT Heri	tage Library	
Signatu	Signature Date								
Your personal information will only be used for the purpose for which it was collected. Fuller details of the Territory Records Office's Privacy Policy can be viewed at: https://www.cmtedd.act.gov.au/legal/privacy									

Publication of the Crown copyright records marked approved on this form is authorised by:							
Name of authorising officer	Signature	Date					