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| **PEJABAT PENGELOLA INFORMASI DAN DOKUMENTASI** |
| **PPID PROVINSI JAWA TIMUR** |
| Jl. A. Yani No. 242-244 Surabaya, Telp. (031) 8294608 Fax. (031) 8294517 |
| **website :** [**www.jatimprov.go.id**](http://www.jatimprov.go.id/) |

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| **FORMULIR PERMOHONAN INFORMASI** |
| **(RANGKAP DUA)** |
| **No. Pendaftaran (diisi petugas)\* : .......................................** |

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| Nama |
| No. KTP / SIM / Paspor |
| Pekerjaan |
| Alamat |

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Nomor Telp / Email

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Rincian Informasi yg Dibutuhkan

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Tujuan Penggunaan Informasi :

Cara Memperoleh Informasi\*\* :

Melihat/membaca/mendengarkan/mencatat Mendapatkan salinan informasi (hardcopy/softcopy)

Cara Mendapatkan Salinan Informasi\*\*\* :

Mengambil langsung Kurir

Pos Faksimili Email

Surabaya, 2023

Pemohon Informasi

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| Petugas Pelayanan Informasi |
| (Penerima Permohonan) |

( ...............................................) (......................................)

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| Keterangan: |
| \* Diisi oleh petugas berdasarkan nomor registrasi permohonan Informasi Publik |
| \*\* Pilih salah satu dengan memberi tanda (x) |
| \*\*\* Coret yang tidak perlu |