

ANNEXURE “A”: Request Records Form

FORM A

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY

(Section 53(1) of the Promotion of Access to Information Act, 2000(Act No. 2 of 2000)

[Regulation 10]

A. Particulars of private body

Managing Director:

Information Officer:

Physical Address:

Postal address:

Telephone: +27

E-mail:

Website:

B. Particulars of person requesting access to the record

- (a) The particulars of the person who lodges the internal appeal must be given below.
- (b) Proof of the capacity in which appeal is lodged, if applicable, must be attached.
- (c) If the appellant is a third person and not the person who originally requested the information, the particulars of the requester must be given at C below.

Full names and surname: _____

Identity number: _____

Postal address: _____

Telephone number: _____

E-mail address: _____

C. Particulars of person on whose behalf request is made

This section must be completed ONLY if a third party (other than the requester) lodges the internal appeal.

Full names and surname: _____

Identity number: _____
Postal address: _____
Telephone number: _____
E-mail address: _____

Capacity in which request is made, when made on behalf of another person (i.e parent, legal guardian, attorney): _____

D. Particulars of record and reason for request

- (a) Provide full particulars of the record to which access is requested, including the reference number if that is known to you, and/or the Department/person where it is held, to enable the record to be located.
- (b) If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.

1. Description of record or relevant part of the record:

2. Reference number, if available: _____

Any further particulars of record:

3. Reason for requesting above information:

E. Fees

- (a) A request for access to a record, other than a record containing personal information about yourself, will be processed only after a request fee of R35.00 has been paid.
- (b) The fee payable for access to a record depends on the form in which access is required and the reasonable time required to search for and prepare a record. For an indication of the fees payable, consult Annexure "C".
- (c) If you qualify for exemption of the payment of any fee, state the reason for exemption.

Reason for exemption from payment of fees:

F. Form of access to record

If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1 to 4 below, state your disability and indicate in which form the record is required.

Disability:

Alternative form in which record is required:

PLEASE NOTE:
Compliance with your request in the specified form may depend on the form in which the record is available.
Access in the form requested may be refused in certain circumstances. In such a case you will be informed if access will be granted in another form.

Mark the appropriate box with an X.

1. If the record is in written or printed form:

- copy of record* inspection of record

2. If record consists of visual images this includes photographs, slides, video recordings, computer-generated images, sketches, etc)

- view the images copy of the images" transcription of the images*

3. If record consists of recorded words or information which can be reproduced insound:

- listen to the soundtrack audio cassette transcription of soundtrack* written or printed document

4. If record is held on computer or in an electronic or machine-readable form:

- printed copy of record* printed copy of information derived from the record" copy in computer readable form* (stiffy or compact disc)

If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you?

Please note: Postage is payable.

- YES NO

Note that access will be granted in the language in which the record is available.

G Particulars of right to be exercised or protected

If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.

1. Indicate which right is to be exercised or protected:

2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

H. Notice of decision regarding request for access

You will be notified in writing whether your request has been approved/denied. If you wish to be informed in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request.

How would you prefer to be informed of the decision regarding your request for access to the record?

Signed at..... on this..... day of20.....

SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE

ANNEXURE “B”: Fees

FORM B

Schedule of Fees	
Description:	Fee
The fee for a copy of the manual as contemplated in regulation 5(c) is R0, 60 for every photocopy of an A4-size page or part thereof.	R0.60
Reproduction Fees: Regulation 7(1):	
For every photocopy of an A4-size page or part thereof	R0.60
For every printed copy of an A4-size page or part thereof held on a computer or in electronic or machine-readable form	R0.40
For a copy in a computer- readable form on:	R5.00
(i) Stiff disc	
(ii) Compact disc	R40.00
For a transcription of visual images:	
(i)for A4-size page or part thereof	R22.00
(ii) copy of visual images	R60.00
(iii)transcription of an audio record, A4 size page or part thereof	R12.00
(iv)copy of an audio record	R17.00
Request fee payable by a requester, other than a personal requester	R35.00
Search Fees- to search and prepare a record for disclosure. The fee is charged per hour (or part of the hour); however the first hour is free.	R15.00
For purposes of section 22(2) of the Act, the following applies:	
(a) Six hours as the hours to be exceeded before a deposit is payable; and	
(b) one third of the access fee is payable as a deposit by the requester.	
The actual postage is payable when a copy of a record must be posted to a requester.	

Please note: All fees are subject to change as allowed for in the Act and consequently such escalations may not always be immediately available at the time of the request being made. Requesters shall be informed by any changes in the fees prior to making a payment.

ANNEXURE C: Objection Form

Objection to the Processing of Personal Information in terms of Section 11(3) of the Protection of Personal Information Act, 2013

Regulations Relating to The Protection of Personal Information, 2018

Note:

- 1 Affidavits or other documentary evidence as applicable in support of the objection may be attached.
- 2 If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.
- 3 Complete as is applicable

A	DETAILS OF DATA SUBJECT
Name(s) and surname/ registered name of data subject:	
Unique Identifier/ Identity Number	
Residential, postal or business address:	
Contact number(s):	
Fax number / E-mail address:	
B	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname/ registered name of data subject:	
Residential, postal or business address:	
Contact number(s):	
Fax number / E-mail address:	
C	REASONS FOR OBJECTION IN TERMS OF SECTION 11(1)(d) to (f) (Please provide detailed reasons for the objection)

Signed at on this day of 20.....

.....
Signature of data subject/designated person

ANNEXURE D: Correction of Deletion Form

Request for Correction or Deletion of Personal Information or Destroying or Deletion of Record of Personal Information in terms of Section 24(1) of the Protection of Personal Information Act, 2013

Regulations Relating to the Protection of Personal Information, 2018

[Regulation 3]

Note:

1. Affidavits or other documentary evidence as applicable in support of the request may be attached.
2. If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.
3. Complete as is applicable.

Mark the appropriate box with an "x".

Request for:

- Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.
- Destroying or deletion of a record of personal information about the data subject which is in possession or under the control of the responsible party and who is no longer authorised to retain the record of information

A	Details of Data Subject
Name(s) and surname/ registered name of data subject:	
Unique Identifier/ Identity Number	
Residential, postal or business address:	
Contact number(s):	
Fax number / E-mail address:	
B	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname/ registered name of data subject:	
Residential, postal or business address:	
Contact number(s):	

Fax number / E-mail address:	
C	Reasons for Objection in Terms of Section 11(1)(D) to (F) (Please Provide Detailed Reasons for The Objection)
D	Reasons for *Correction or Deletion of the Personal Information about the Data Subject in Terms of Section 24(1)(a) which is in Possession or Under the Control of the Responsible Party; and or Reasons for *Destruction or Deletion of a Record of Personal Information about the Data Subject in Terms of Section 24(1)(b) which the Responsible Party is no longer Authorised to Retain. (Please Provide Detailed Reasons for the Request)