FORM 2

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY

[Regulation 7]

Particulars of private body

Information Officer
Regus Business Centre, 1st Floor, Willowbridge Centre
Carl Cronje Drive, Tygervalley
Cape Town,
7530

Particulars of person requesting access to the record

The particulars of the person who requests access to the record must be given below. The address and/or fax number in the Republic to which the information is to be sent must be given. Proof of the capacity in which the request is made, if applicable, must be attached.

Full names and surnames: _____

Identity number: _____

Postal address: _____

Fax number: _____ Telephone number: _____

Mobile number: _____Email address: _____

Capacity in which request is made, when made on behalf of another person: _____

Particulars of person on whose behalf request is made

This section must be completed ONLY if a request for information is made on behalf of another person.

Full names and surname: _____

Identity number: _____

Particulars of record

Provide full particulars of the record to which access is requested, including the reference number if that is known to you, to enable the record to be located. 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.

Description of record or relevant part of record: _____

_____

Fees

A request for access to a record, other than a record containing personal information about yourself, will be processed only after a request fee has been paid. You will be notified of the amount required to be paid as the request fee. 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. If you qualify for exemption of the payment of any fee, please state the reason for exemption.

Reason for exemption from payment of fees:

_____

_____

_____

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 hereunder, state your disability and indicate in which form the record is required.

Disability: _____

Form in which record is required: _____

_____

_____

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.
The fee payable for access for the record, if any, will be determined partly by the form in which access is requested.
Mark the appropriate box below with an 'x'.

If the record is in written or printed form:

☐ copy of record*

☐ inspection of record

If the 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*

If record consists of recorded words or information which can be reproduced in sound:

☐ listen to the soundtrack (audio cassette)

☐ transcription of soundtrack (written or printed document)*

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? Postage is payable.

☐ Yes ☐ No

Particulars of right to be exercised or protected

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

Indicate which right is to be exercised or protected: _____
_____
_____

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

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 _____ this _____day of _____ 24 .

_____

Signature of requester (or person on whose behalf request is made)