



REQUEST FOR ACCESS FORM (in terms of The Promotion of Access to Information Act)			
NAME OF THE COMPANY TO WHOM THE REQUEST IS MADE			
[Insert full name of company]			
PARTICULARS OF PERSON REQUESTING ACCESS TO INFORMATION			
Surname		First names	
Identity number		E-mail address	
Telephone no.		Facsimile no.	
Postal address			
PARTICULARS OF PERSON ON WHOSE BEHALF REQUEST IS MADE (IF APPLICABLE)			
Surname		First names	
Identity number		E-mail address	
Telephone no.		Facsimile no.	
Postal address			
PARTICULARS OF RECORDS REQUESTED			
REFERENCE (if applicable) :			
FORM OF ACCESS TO RECORD			
NOTES:			
<p>The particulars of the person who requests access to the record must be given.</p> <p>a) The address and/or fax number in the Republic to which the information is to be sent must be given.</p> <p>b) Proof of the capacity in which the request is made, if applicable, must be attached.</p> <p>c) Compliance with your request in the specified form may depend on the form in which the record is available.</p> <p>d) 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.</p> <p>e) The fee payable for access to the record, if any, will be determined partly by the form in which access is requested.</p> <p>f) 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.</p> <p>g) If the provided space is inadequate, please continue on a separate folio and attach it to this form.</p> <p>h) The requester must sign all the additional folios.</p>			
<i>(Mark the appropriate shaded box with an X.)</i>			
<b>1. If the record is in written or printed form:</b>			
<input type="checkbox"/>	copy of record*	<input type="checkbox"/>	Inspection of record
<b>2. If the record consists of visual images:</b>			
(this includes photographs, slides, video recordings, computer-generated images, sketches, etc.):			
<input type="checkbox"/>	view the images	<input type="checkbox"/>	copy of the images*
<input type="checkbox"/>		<input type="checkbox"/>	transcription of the images*
<b>3. If the record consists of recorded words or information which can be reproduced in sound:</b>			
<input type="checkbox"/>	listen to the soundtrack	<input type="checkbox"/>	Transcription of soundtrack*(written or printed)



<b>4. If record is held on computer or in an electronic or machine-readable form:</b>			
	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 transactions to be posted to you?			YES      NO
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 above, state your disability and indicate in which form the record is required.			
Disability			
Form in which record is required:			
<b>PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED</b>			
<b>EXPLANATION OF WHY RECORD IS REQUIRED FOR EXERCISE OR PROTECTION OF ABOVEMENTIONED RIGHT</b>			
<b>NOTICE OF DECISION REGARDING REQUEST FOR ACCESS</b>			
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.			
<b>FEES</b>			
<p>(a) A request for access to a record, other <i>than</i> a record containing personal information about yourself, will be processed only after a request fee has been paid.</p> <p>(b) You will be <i>notified of</i> the amount required to be paid as the request fee.</p> <p>(c) The fee payable for access to a record depends <i>on</i> the form <i>in which</i> access is required and the reasonable time <i>required</i> to search for and prepare a record.</p> <p>(d) If you qualify for exemption <i>of</i> the payment <i>of</i> any fee, please state the reason for exemption.</p>			
<b>SIGNATURE</b>			
Signed at		Date	
Signature of the Requester			