



ANNEXURE B, FORM A
REQUEST FOR ACCESS TO RECORD(S) OF PUBLIC BODY
(Section 18(1) of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000))
[Regulation 6]

FOR DEPARTMENTAL USE ONLY

Reference number:

Request received by (state rank,
Name and surname of information officer/deputy information officer) on (date)
at(place).

Request fee (if any): R.....

Deposit (if any): R.....

Access fee: R.....

.....
**SIGNATURE OF INFORMATION OFFICER/
DEPUTY INFORMATION OFFICER**

A. PARTICULARS OF PUBLIC BODY

*(The requester **MUST** complete this prescribed form in black ink and in print. On completion, please send or deliver this form to only one of the addresses listed below):*

The Information Officer

Ms. NZ Nkamba
Head Official
Private Bag x11205
Mbombela
1200

Deputy Information Officer:

Adv. V Baloyi
Director: Legal Services
Private Bag x11205
Mbombela
1200

or can be hand delivered to:

Office of the Head of Department

No. 7 Government Boulevard
Building No 4, Upper Ground Floor
Riverside Park Extension 2
Mbombela, 1200

E-mail: hodfinance@mpg.gov.za

Fax: (013) 766 4604

Legal Services Unit

No. 7 Government Boulevard
Building No 4, Lower Ground Floor
Riverside Park Extension 2
Mbombela, 1200

Email: vbaloyi@mpg.gov.za

Fax: (013) 766 9497

All enquiries may be directed to: (013) 766 4155/4450/4431

B. PARTICULARS OF PERSON REQUESTING ACCESS TO THE RECORD

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

Full names and surname:

Identity number:

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Postal address:

Telephone number: (.....) Fax number: (.....)

E-mail address:

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

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C. 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:

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D. PARTICULARS OF RECORD

- (a) 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.
- (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:**

3. **Any further particulars of record**

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 has been paid.
- (b) You will be notified of the amount required to be paid as the request fee.
- (c) 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.
- (d) If you qualify for exemption of the payment of any fee, please 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 (please describe):

Form in which record is required:

Mark the appropriate box with an **X**.

NOTES:

- (a) Compliance with your request for access in the specified form may depend on the form in which the record is available.
- (b) 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.
- (c) The fee payable for access to the record, if any, will be determined partly by the form in which access is requested

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 in sound:			
	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? Postage is payable.			YES NO
<i>Note that if the record is not available in the language you prefer, access may be granted in the language in which the record is available.</i>			
In which language would you prefer the record? _____			

G. 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?

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

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SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE

NB: Please take note that the period of **30 days** to deal with your request may be extended for a further period of not more than **30 days**. By signing here, you consent that your request may be extended from **30 to 60 days**. If an extension is deemed necessary, you will be duly notified to grant permission in this regard.

This form complies with section 29 of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000)