



Request for access to records of public body

Section 18(1) of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000)
(Regulation 2)

FOR DEPARTMENTAL USE

Reference number

Request received by

information officer / deputy information officer)

Name and surname

Rank

on (date)

at (place)

Request fee (if any)

Deposit (if any)

Access fee

Signature

(information officer / deputy information officer)

A. Particulars of public body

information officer / deputy information officer

B. Particulars of person requesting access to the record

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

Full names and surname

Postal address

Identity number

Telephone

Email

Fax

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

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

D. Particulars of record

- (a) Provide full particulars of the record to which access is requested, including the reference number if it 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.

Description of record or relevant part of the record

Reference number, if available

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 the record.
- (d) If you qualify for exemption from the payment of any fee, please state the reason for this.

Any further particulars of record



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

Disability	Form in which record is required

Notes:

- (a) Compliance with your request for access in the specified form depends 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 a record, if any, will be determined partly by the form in which access is requested.

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 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*

3. If the record consists of recorded words or information which can be reproduced in sound

listen to the soundtrack (audio cassette)

transcription of soundtrack* (stiffy or compact disc)

4. If the record is stored on computer or in an electronic or machine-readable format

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 transcript of a record (above), do you want the copy or transcription to be posted to you?** A postal fee is payable.

Yes

No

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. 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 or denied. If you wish to be informed thereof in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request.

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

Signed at _____ (place)
this ____ day of _____ (month) _____ (year)

Signature Signature of requester / person on whose behalf request is made	
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