

PAIA

Request for Information Form



REQUEST FOR INFORMATION FORM

A. 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 of 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: _____

Postal Address: _____

Fax number: _____

Telephone number: _____

E-mail address: _____

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 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: _____

1 Fee Structure

1. The fee for a copy of the manual as contemplated in regulation 9(2)(c) is R1,10 for every photocopy of an A4-size page or part thereof.

2. The fees for reproduction referred to in regulation 11(1) are as follows:

(a) For every photocopy of an A4-size page or part thereof R1,10

(b) For every printed copy of an A4-size page or part thereof held on a computer or in electronic or machine-readable form R0,75

(c) For a copy in a computer-readable form on -

(i) compact disc R70,00

(d) (i) For a transcription of visual images, for an A4-size page or part thereof R40,00

(ii) For a copy of visual images R60,00

(e) (i) For a transcription of an audio record, for an A4-size page or part thereof R20,00

(ii) For a copy of an audio record R30,00

3. The request fee payable by a requester, other than a personal requester, referred to in regulation 11(2) is R50,00.

4. The access fees payable by a requester referred to in regulation 11(3) are as follows:

(1) (a) For every photocopy of an A4-size page or part thereof R1,10

(b) For every printed copy of an A4-size page or part

thereof held on a computer or in electronic or machine-readable form R0,75

(c) For a copy in a computer-readable form on -

(i) compact disc R70,00

(d) (i) For a transcription of visual images, for an A4-size page or part thereof R40,00

(ii) For a copy of visual images R60,00

(e) (i) For a transcription of an audio record, for an A4-size page or part thereof R20,00

(ii) For a copy of an audio record R30,00
 (f) To search for and prepare the record for disclosure, R30,00 for each hour or part of an hour reasonably required for such search and preparation.

(2) For purposes of section 54(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.
- (3) The actual postage is payable when a copy of a record must be posted to a requester.

F. Form of Access to Record

<p>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:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Form in which record is required:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Mark the appropriate box with and "X".

NOTES:

(a) Your indication as to the required form of access depends on the form in which the record is available.

(b) Access in the form requested may be refused in 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
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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
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3. If the record consists of recorded words or information which can be reproduced in sound-

Listen to the soundtrack (CD media)	Transcription of soundtrack (written or printed document)
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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* (USB Drive or compact disc)
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*If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you?

YES

NO

A postal fee is payable.

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 disapproved/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 _____ 20_____

**SIGNATURE OF REQUESTER/PERSON
ON WHO'S BEHALF REQUEST IS MADE**

Review History:

Policy REF	ASAP	Classification	PAIA Request Form
Author	Andre Booyesen	Document	PAIA: Request for Information Form
Approved By	Marius	Signature	

Version	Dated	Amendments Made	Person
1.0	October 2018	Original Compilation	Andre Booyesen
1.1	Nov. 2019	Review	A. Booyesen
2.0	Dec. 2020	Updates	A. Booyesen
2.1	Apr. 2021	Review	A. Booyesen

References (Policies, Procedures, Documents and Related Forms)

Doc Ref	Dated	Description	Person