

# Health24 (Pty)Ltd

(Registration number: 2000/012930/07)  
**(Health24)**

MANUAL PREPARED IN TERMS OF SECTION 51 OF THE  
PROMOTION OF ACCESS TO INFORMATION ACT 2 OF 2000  
(AS AMENDED) (PAIA)

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## 1. PURPOSE OF PAIA MANUAL

This PAIA Manual is useful for the public to:

- 1.1 check the categories of records held by a body which are available without a person having to submit a formal PAIA request;
- 1.2 have a sufficient understanding of how to make a request for access to a record of the body, by providing a description of the subjects on which the body holds records and the categories of records held on each subject;
- 1.3 know the description of the records of the body which are available in accordance with any other legislation;
- 1.4 access all the relevant contact details of the Information Officer and Deputy Information Officer/s who will assist the public with the records they intend to access;
- 1.5 know the description of the guide on how to use PAIA, as updated by the Regulator and how to obtain access to it;
- 1.6 know if the body will process personal information, the purpose of processing of personal information and the description of the categories of data subjects and of the information or categories of information relating thereto;
- 1.7 know the description of the categories of data subjects and of the information or categories of information relating thereto;
- 1.8 know the recipients or categories of recipients to whom the personal information may be supplied;
- 1.9 know if the body has planned to transfer or process personal information outside the Republic of South Africa and the recipients or categories of recipients to whom the personal information may be supplied; and
- 1.10 know whether the body has appropriate security measures to ensure the confidentiality, integrity and availability of the personal information which is to be processed.

Any requester is advised to contact the Media24 Information Officer should he/she require any assistance in respect of the utilisation of this manual. Alternatively, a request may be made via the following link: [Data Subject Access Request \(DSAR\) form](#).

## 2. DEFINITIONS AND INTERPRETATIONS

The following words will bear the following meaning in this manual:

“Data Subject”	means the person to whom personal information relates
“Guide”	means the Guide on how to use PAIA by any person who wishes to exercise any right contemplated in PAIA and POPIA;
“Information Regulator”	the Information Regulator established in terms of section 39 of the Protection of Personal Information Act 4 of 2013;
“Health24”	Health24 (Pty) Ltd and its subsidiaries as set out in paragraph 11 of this manual;
“PAIA” “POPIA”	Promotion of Access to Information Act 2 of 2000 (as amended); Protection of Personal Information Act 4 of 2013;
“the/this manual”	shall mean this manual together with all annexures as available at the offices and on the <a href="#">website of Media24</a> from time to time;

### 3. CONTACT DETAILS (Section 51(1)(a) of PAIA)

<b>Name of body</b>	Health24 (Pty) Ltd
<b>The appointed Information Officer:</b>	Lurica Jineanne Jacquet
<b>Address:</b>	Media24 Centre 40 Heerengracht Cape Town 8001
<b>Postal address:</b>	PO Box 2271 Cape Town, 8000
<b>Telephone:</b>	<b>+27 21 406 2021</b>
<b>E-mail:</b>	<a href="mailto:privacy@media24.com">privacy@media24.com</a>
<b>The appointed deputy Information Officer (PAIA):</b>	Su-Anne Van Der Merwe
<b>Address:</b>	Media24 Centre 40 Heerengracht Cape Town 8001
<b>Postal address:</b>	PO Box 2271 Cape Town, 8000
<b>Telephone:</b>	<b>+27 21 406 2021</b>
<b>E-mail:</b>	<a href="mailto:privacy@media24.com">privacy@media24.com</a>

## 4. INFORMATION REGULATOR'S GUIDE

4.1 The Information Regulator has, in terms of Section 10(1) of PAIA, as amended, updated and made easily available the revised [Guide on how to use PAIA \("Guide"\)](#), in an easily comprehensible form and manner, as may reasonably be required by a person who wishes to exercise any right contemplated in PAIA and POPIA.

4.2 The Guide is available in each of the official languages and braille.

4.3 The aforesaid Guide contains the description of:

4.3.1 the objects of PAIA and POPIA;

4.3.2 the postal and street address, phone and fax number and, if available, electronic mail address of –

4.3.3 the Information Officer of every public body and private body, and

4.3.4 every Deputy Information Officer of every public and private body designated in terms of section 17(1) of PAIA<sup>1</sup> and section 56 of POPIA<sup>2</sup>;

4.3.5 the manner and form of a request for –

4.3.6 access to a record of a private body contemplated in section 50<sup>3</sup>; and

4.3.7 access to a record of a public body contemplated in section 11<sup>4</sup>.

4.3.8 assistance available from the Information Regulator in terms of PAIA and POPIA;

4.3.9 all remedies in law available regarding an act or failure to act in respect of a right or duty conferred or imposed by PAIA and POPIA, including the manner of lodging –

4.3.9.1 an internal appeal;

4.3.9.2 a complaint to the Information Regulator; and

4.3.9.3 an application with a court against a decision by the information officer of a public body, a decision on internal appeal or a decision by the Information Regulator or a decision of the head of a private body;

<sup>1</sup> Section 17(1) of PAIA – For the purposes of PAIA, each public body must, subject to legislation governing the employment of personnel of the public body concerned, designate such number of persons as deputy information officers as are necessary to render the public body as accessible as reasonably possible for requesters of its records.

<sup>2</sup> Section 56(a) of POPIA – Each public and private body must make provision, in the manner prescribed in section 17 of the Promotion of Access to Information Act, with the necessary changes, for the designation of such a number of persons, if any, as deputy information officers as is necessary to perform the duties and responsibilities as set out in section 55(1) of POPIA.

<sup>3</sup> Section 50(1) of PAIA – A requester must be given access to any record of a private body if:

a) that record is required for the exercise or protection of any rights;

b) that person complies with the procedural requirements in PAIA relating to a request for access to that record; and

c) access to that record is not refused in terms of any ground for refusal contemplated in chapter 4 of this Part.

<sup>4</sup> Section 11(1) of PAIA – A requester must be given access to a record of a public body if that requester complies with all the procedural requirements in PAIA relating to a request for access to that record; and access to that record is not refused in terms of any ground for refusal contemplated in chapter 4 of this Part.

- 4.3.10 the provisions of sections 14<sup>5</sup> and 51<sup>6</sup> requiring a public body and private body, respectively, to compile a manual, and how to obtain access to a manual;
- 4.3.11 the provisions of sections 15<sup>7</sup> and 52<sup>8</sup> providing for the voluntary disclosure of categories of records by a public body and private body, respectively;
- 4.3.12 the notices issued in terms of sections 22<sup>9</sup> and 54<sup>10</sup> regarding fees to be paid in relation to requests for access; and
- 4.3.13 the regulations made in terms of section 92<sup>11</sup> of PAIA.

4.4 Members of the public can inspect or make copies during normal working hours of the Guide from the offices of the public and private bodies (in at least two of the official languages), including the office of the Information Regulator (in each of the official languages). The Guide in each of the official languages can also be obtained:

- 4.4.1 from the Government Gazette;
- 4.4.2 upon request from the Information Regulator, by the Information Officer on a form which corresponds substantially with Form 1 of Annexure A to the Regulations;
- 4.4.3 upon request from the Information Regulator, by any person, other than an Information Officer, referred to in paragraph 4.4.2 above, on a form that corresponds substantially with Form 2 of **Annexure A** to the Regulations. The fees in relation to a copy of the Guide are provided for in Item 1 of **Annexure B** may apply to the aforesaid person;
- 4.3.4 from the website of the Information Regulator (<https://www.justice.gov.za/inforeg/>) and that of any public and private bodies.

4.5 A copy of the Guide is also available in the following two official languages, for public inspection during normal office hours:

#### 4.5.1 English and Afrikaans

<sup>5</sup> Section 14(1) of PAIA – The information officer of a public body must, in at least three official languages, make available a manual containing information listed in paragraph 4 above.

<sup>6</sup> Section 51(1) of PAIA – The head of a private body must make available a manual containing the description of the information listed in paragraph 4 above.

<sup>7</sup> Section 15(1) of PAIA – The information officer of a public body must make available in the prescribed manner a description of the categories of records of the public body that are automatically available without a person having to request access.

<sup>8</sup> Section 52(1) of PAIA – The head of a private body may, on a voluntary basis, make available in the prescribed manner a description of the categories of records of the private body that are automatically available without a person having to request access.

<sup>9</sup> Section 22(1) of PAIA – The information officer of a public body to whom a request for access is made, must by notice require the requester to pay the prescribed request fee (if any), before further processing the request.

<sup>10</sup> Section 54(1) of PAIA – The head of a private body to whom a request for access is made must by notice require the requester to pay the prescribed request fee (if any), before further processing the request.

<sup>11</sup> Section 92(1) of PAIA provides that – “The Minister may, by notice in the Gazette, make regulations regarding:

- a) any matter which is required or permitted by this Act to be prescribed;
- b) any matter relating to the fees contemplated in sections 22 and 54;
- c) any notice required by this Act;
- d) uniform criteria to be applied by the information officer of a public body when deciding which categories of records are to be made available in terms of section 15; and
- e) any administrative or procedural matter necessary to give effect to the provisions of this Act.”

## 5. INFORMATION/DOCUMENTS AVAILABLE IN ACCORDANCE WITH OTHER LEGISLATION

(Section 51(1)(d) of PAIA)

Health24 keeps information/documents in accordance with applicable legislation including but not limited to:

- Companies Act 71 of 2008, as amended
- Income Tax Act 58 of 1962 (Section 75), as amended
- Value-Added Tax Act 89 of 1991 (Section 65), as amended
- Customs and Excise Act 91 of 1964 (Section 101), as amended
- Basic Conditions of Employment Act 75 of 1997 (Section 31), as amended
- Employment Equity Act 55 of 1998 (Section 26), as amended
- Compensation for Occupational Injuries and Diseases Act 130 of 1993 (Section 97), as amended
- Insolvency Act 24 of 1936 (Sections 134 and 155), as amended
- Occupational Health and Safety Act 85 of 1993, as amended
- South African Reserve Bank Act 90 of 1989, as amended
- Labour Relations Act 66 of 1995, as amended
- Skills Development Act 97 of 1998, as amended
- Skills Development Levies Act 9 of 1999, as amended
- Unemployment Insurance Act 63 of 2001, as amended
- Unemployment Insurance Contributions Act 4 of 2002, as amended
- Copyright Act 98 of 1978, as amended
- Trade Marks Act 194 of 1993, as amended
- Consumer Protection Act 68 of 2008, as amended
- Electronic Communications and Transactions Act 25 of 2002, as amended
- Electronic Communications Act 13 of 2000, as amended
- Protection of Personal Information Act 4 of 2013, as amended.



## 6. DOCUMENTS/INFORMATION HELD BY HEALTH24 IN TERMS OF PAIA

(Sections 51(1)(e) and 17 of PAIA)

### Webpage

Health24 is a subsidiary Media24 Proprietary Limited 1950/038385/07. The Media24 Webpage ([www.media24.com](http://www.media24.com)), accessible to anyone with access to the internet, contains, *inter alia*, the following information:

- Corporate information
- Composition of the board and management team
- a link to all Media24 Integrated Annual Reports (only published until 2020)
- a link to Fast Facts about Media24
- Information on Media24's divisions, namely Books (general and educational), Digital Media, Content Marketing, Ecommerce, Logistics (ecommerce fulfilment and media), Print Media (newspapers and magazines) and Television.

### Other

The documents listed below include information pertaining to the day-to-day management of the business of Health24:

- Standard employment contracts
- Employment equity plan and report
- Media24 personnel report
- Staff handbook
- Human resources policies and procedures
- List of trademarks and pending applications
- Insurance policies
- Rules and regulations relating to pension and provident funds
- Documentation with regard to share option schemes
- Commercial contracts
- Company policies
- Constitutive documentation
- Statutory records.

It is recorded that any and all documents/information requested pertaining to the aforesaid will always only be made available to a requestor subject to the provisions of PAIA.

## Automatically available records

The records listed below are automatically available without having to submit a formal request to access the information in terms of PAIA.

Reproduction fees may be levied at the discretion of Health24 in accordance with reproduction costs, preparation, and time required to search and prepare disclosures.

Health24 will provide you with a written estimate of the fee before providing the services.

- Public corporate records
- Media releases
- BEE certificates
- Published financial records which are generally available to the public.

## 7 REQUEST PROCEDURE

### 7.1 Completion of the prescribed form

7.1.1 Any request for access to a record in terms of PAIA must substantially correspond with Form 2 of Annexure A to Government Notice No. R.757 dated 27 August 2021 promulgated under the PAIA Regulations and should be specific in terms of the record requested. Please refer to Annexure A. A request can also be submitted via the following link: [Data Subject Access Request \(DSAR\) form](#)

7.1.2 A request for access to information which does not comply with the formalities as prescribed by PAIA will be returned to you.

7.1.3 POPIA provides that a data subject may, upon proof of identity, request Health24 to confirm, free of charge, all the information it holds about the data subject and may request access to such information, including information about the identity of third parties who have or have had access to such information.

7.2 POPIA also provides that where the data subject is required to pay a fee for services provided to him/her, Health24 must provide the data subject with a written estimate of the payable amount before providing the service and may require that the data subject pays a deposit for all or part of the fee. Grounds for refusal of the data subject's request are set out in PAIA and are discussed below.

7.2.1 POPIA provides that a data subject may object, at any time, to the processing of personal information by Health24, on reasonable grounds relating to his/her particular situation, unless legislation provides for such processing. The data subject must complete the prescribed form attached hereto as Annexure E and submit it to the Information Officer at the postal or physical address, facsimile number or electronic mail address set out above.

7.2.2 A data subject may also request Health24 to correct or delete personal information about the data subject in its possession or under its control that is inaccurate, irrelevant, excessive, out of date, incomplete, misleading or obtained unlawfully; or destroy or delete a

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record of personal information about the data subject that Health24 is no longer authorised to retain records in terms of POPIA's retention and restriction of records provisions.

7.2.3 A data subject that wishes to request a correction or deletion of personal information or

the destruction or deletion of a record of personal information must submit a request to the Information Officer at the postal or physical address, facsimile number or electronic mail address set out above on the form attached hereto as Annexure F.

### 7.3 Proof of identity

Proof of identity is required to authenticate your identity and the request. You may, in addition to this prescribed form, be required to submit acceptable proof of identity such as a certified copy of your identity document or other legal forms of identity.

## 7.4 Payment of the prescribed fees

7.4.1 There are two categories of fees which are payable:

7.4.1.1 The request fee: R140

7.4.1.2 The access fee: This is calculated by taking into account reproduction costs, search and preparation costs, as well as postal costs. These fees are set out in Annexure B.

7.4.1.3 Section 54 of PAIA entitles Health24 to levy a charge or to request a fee to enable it to recover the cost of processing a request and providing access to records. The fees that may be charged are set out in Annexure B of Government Notice No. R.757 dated 27 August 2021 promulgated under the PAIA Regulations. Please refer to Annexure D.

7.4.1.4 Where a decision to grant a request has been taken, the record will not be disclosed until the necessary fees have been paid in full.

## 7.5 Timelines for consideration of a request for access:

7.5.1 Requests will be processed within 30 (thirty) days, unless the request contains considerations that are of such a nature that an extension of the time limit is needed.

7.5.2 The Information Officer will inform the requester of the decision, and the fees payable (if applicable) on a form that corresponds substantially with Form 3 of Annexure A to Government Notice No. R.757 dated 27 August 2021 promulgated under the PAIA Regulations.

7.5.3 Should an extension be required, you will be notified, together with reasons explaining why the extension is necessary.

## 7.6 Grounds for refusal of access and protection of information:

7.6.1.1 There are various grounds upon which a request for access to a record may be refused. These grounds include:

7.6.1.2 the protection of personal information of a third person (who is a natural person) from unreasonable disclosure;

7.6.1.3 the protection of commercial information of a third party (for example: trade secrets; financial, commercial, scientific or technical information that may harm the commercial or financial interests of a third party);

7.6.1.4 if disclosure would result in the breach of a duty of confidence owed to a third party;

7.6.1.5 if disclosure would jeopardise the safety of an individual or prejudice or impair certain property rights of a third person;

7.6.1.6 if the record was produced during legal proceedings, unless that legal privilege has been waived;

7.6.1.7 if the record contains trade secrets, financial or sensitive information or any information that would put Health24 at a disadvantage in negotiations or prejudice it in commercial competition; and/or

7.6.1.8 if the record contains information about research being carried out or about to be carried out on behalf of a third party or by Health24.

7.6.2 Section 70 of PAIA contains an overriding provision. Disclosure of a record is compulsory if it would reveal (i) a substantial contravention of, or failure to comply with the law; or (ii) there is an imminent and serious public safety or environmental risk; and (iii) the public interest in the disclosure of the record in question clearly outweighs the harm contemplated by its disclosure.

7.6.3 If the request for access to information affects a third party, then such third party must first be informed within 21 (twenty-one) days of receipt of the request. The third party would then have a further 21 (twenty-one) days to make representations and/or submissions regarding the granting of access to the record.

## 8. PROCESSING OF PERSONAL INFORMATION

### 8.1 Purpose of Processing Personal Information of a data subject by Health24

Our privacy notice describes how we handle the personal information we collect about you and/or receive from you. Please refer to the Media24 Group [Privacy Policy](#) for more information about Health24 processing activities.

### 8.2 Categories of Data Subjects and the information or categories of information relating thereto

In order to fulfill our commitments to for example our customers, our service providers, our employees and our shareholders, we may collect, process and store their personal information. In adherence to the principal of minimality as described in POPIA, we collect and process only personal information that is relevant and necessary for us to fulfil our obligations, and to deliver and improve our services. Examples of personal information we may collect include, but are not limited to:

- Names and surnames, registered names, identification numbers, account numbers and other unique identifiers;
- Contact numbers, email addresses, physical addresses, and location information;
- Financial records, education, and employment history;
- Information related to health, mental health, race, ethnicity, sex, gender, disability;
- Biometric information.

### 8.3 The recipients or categories of recipients to whom the personal information may be supplied

8.3.1 Where applicable we may provide or make your personal information available to other recipients other than Health24 which includes but are not limited to: -

8.3.1.1 Other companies in the Naspers Limited group of companies;

8.3.1.2 Companies that provide services to us or on our behalf, or enable us to provide services to you or operate the platforms, including contractors, debt collectors, lawyers and auditors;

8.3.1.3 Other parties where we are required to provide your personal information to comply with the law or protect our platforms;

8.3.1.4 Prospective and actual buyers, in the event that we sell, transfer or merge any part of our businesses or assets, or prospective or actual sellers, in the event that we choose to buy or merge with any other business; and

8.3.1.5 Third parties if you have agreed to us sharing your personal information with them.

8.3.2 We will not share your personal information with any third parties, unless we are obliged to do so, for example:

8.3.2.1 to satisfy an applicable law or conform to any other legal or regulatory requirement, for example South African Revenue Service (SARS) and South African Police Service (SAPS);

8.3.2.2 to comply with the requirements of existing or future legal proceedings;

8.3.2.3 to prevent fraud, loss, bribery, or corruption; and

8.3.2.4 to allow the third party to provide a service or process personal information on our behalf.

#### 8.4 Planned transborder flows of personal information

Health24 has adopted a cloud-first strategy and has migrated several critical services to increase availability, resiliency and redundancy, where it is cost-effective to do so. Health24 primarily uses Microsoft Azure as its public cloud provider, but also has some digital services with Google Cloud Platform, Amazon AWS and Oracle Cloud, in the EU region. Health24 also shares information internally to other companies in the Naspers Limited group of companies.

All public cloud providers offer geo-redundancy, high availability services, and disaster recovery.

Cloud Provider	Region	Details
Microsoft Azure	Primary: ZA north Secondary: ZA west; EU west	<a href="#">Data residency in Azure   Microsoft Azure</a>
Google Cloud Platform	Primary: EU west (Belgium)	<a href="#">Global locations – regions and zones   Google Cloud</a>
Oracle Cloud	Primary: ZA (CPT and JHB) Monitoring: Germany central (Frankfurt)	<a href="#">Cloud data center regions and locations   Oracle South Africa</a>
Amazon AWS	Primary: EU west (Ireland)	<a href="#">Primary: EU west (Ireland) Global infrastructure regions and AZs (amazon.com)</a>

#### 8.5 Information Security Measures implemented by Health24

Health24 acknowledges the importance of information security measures to ensure the confidentiality, integrity and availability of your personal information. Please refer to the Media24 Group [Information Security](#) tab for more information on the appropriate, reasonable, technical and organisational measures established by Media24.

## 9. AVAILABILITY OF THE MANUAL

(Section 51(3) of PAIA)

9.1 A copy of the manual is available:

9.1.1 on the Media24 website ([www.media24.com](http://www.media24.com));

9.1.2 at the offices of Media24 for public inspection during normal business hours. For your protection and ours, we have implemented appropriate Covid-19 protocols to facilitate the inspection;

9.1.3 to any person upon request and upon the payment of a reasonable prescribed fee; and

9.1.4 to the Information Regulator upon request.

9.2 A fee for a copy of the manual, as contemplated in Annexure A of the Manual, will be payable per each A4-size photocopy made.

9.3 The request forms and fee structure are available on the Information Regulator's website <https://www.justice.gov.za/inforeg/>

## 10. UPDATING OF THE MANUAL

The Information Officer of Health24 will on a regular basis update this manual.

**11. VARIOUS SUBSIDIARIES OF HEALTH24**

Name	Registration Number
NONE	



**REQUEST FOR ACCESS TO RECORD****FORM 2**  
[Regulation 7]**NOTE:**

1. Proof of identity must be attached by the requester.
2. If requests made on behalf of another person, proof of such authorisation, must be attached to this form.

**TO:** The Information Officer


(Address)

E-mail address: Fax number: 

Mark with an "X"

Request is made in my own name

Request is made on behalf of another person.

PERSONAL INFORMATION			
Full Names			
Identity Number			
Capacity in which request is made <i>(when made on behalf of another person)</i>			
Postal Address			
Street Address			
E-mail Address			
Contact Numbers	Tel. (B):		Facsimile: <input type="text"/>
	Cellular:		
Full names of person on whose behalf request is made <i>(if applicable)</i> :			
Identity Number			
Postal Address			

Street Address			
E-mail Address			
Contact Numbers	Tel. (B)		Facsimile
	Cellular		
<b>PARTICULARS OF RECORD REQUESTED</b>			
<i>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 page and attach it to this form. All additional pages must be signed.)</i>			
Description of record or relevant part of the record:			
Reference number, if available			
Any further particulars of record			
<b>TYPE OF RECORD</b> <i>(Mark the applicable box with an "X")</i>			
Record is in written or printed form			
Record comprises virtual images <i>(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)</i>			
Record consists of recorded words or information which can be reproduced in sound			
Record is held on a computer or in an electronic, or machine-readable form			

**FORM OF ACCESS**  
*(Mark the applicable box with an "X")*

Printed copy of record <i>(including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form)</i>	
Written or printed transcription of virtual images <i>(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)</i>	
Transcription of soundtrack <i>(written or printed document)</i>	
Copy of record on flash drive <i>(including virtual images and soundtracks)</i>	
Copy of record on compact disc drive <i>(including virtual images and soundtracks)</i>	
Copy of record saved on cloud storage server	

**MANNER OF ACCESS**  
*(Mark the applicable box with an "X")*

Personal inspection of record at registered address of public/private body <i>(including listening to recorded words, information which can be reproduced in sound, or information held on computer or in an electronic or machine-readable form)</i>	
Postal services to postal address	
Postal services to street address	
Courier service to street address	
Facsimile of information in written or printed format <i>(including transcriptions)</i>	
E-mail of information <i>(including soundtracks if possible)</i>	
Cloud share/file transfer	
Preferred language <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>	

**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:	

<b>FEES</b>	
a)	<i>A request fee must be paid before the request will be considered.</i>
b)	<i>You will be notified of the amount of the access fee to be paid.</i>
c)	<i>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.</i>
d)	<i>If you qualify for exemption of the payment of any fee, please state the reason for exemption</i>
Reason	

You will be notified in writing whether your request has been approved or denied and if approved the costs relating to your request, if any. Please indicate your preferred manner of correspondence:

Postal address	Facsimile	Electronic communication <i>(Please specify)</i>

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Signature of Requester / person on whose behalf request is made**

-----  
**FOR OFFICIAL USE**

<i>Reference number:</i>	
<i>Request received by: (State Rank, Name And Surname of Information Officer)</i>	
<i>Date received:</i>	
<i>Access fees:</i>	
<i>Deposit (if any):</i>	

\_\_\_\_\_  
**Signature of Information Officer**

**Annexure B FEES IN RESPECT OF PRIVATE BODIES**

**FEES IN RESPECT OF PRIVATE BODIES**

<b>Item</b>	<b>Description</b>	<b>Amount</b>
1	The request fee payable by every requester	R140.00
2	Photocopy of A4-size page	R2.00 per page or part thereof.
3	Printed copy of A4-size page	R2.00 per page or part thereof.
4	For a copy in a computer-readable form on: (i) Flash drive (to be provided by requestor) (ii) Compact disc <ul style="list-style-type: none"> <li>• If provided by requestor</li> <li>• If provided to the requestor</li> </ul>	R40.00 R40.00 R60.00
5	For a transcription of visual images per A4-size page	Service to be outsourced. Will depend on quotation from service provider.
6	Copy of visual images	Service to be outsourced. Will depend on quotation from service provider.
7	Transcription of an audio record, per A4-size page	R24.00
8	Copy of an audio record on: (i) Flash drive (to be provided by requestor) (ii) Compact disc <ul style="list-style-type: none"> <li>• If provided by requestor</li> <li>• If provided to the requestor</li> </ul>	R40.00 R40.00 R60.00
9	To search for and prepare the record for disclosure for each hour or part of an hour, excluding the first hour, reasonably required for such search and preparation. To not exceed a total cost of	R145.00 R435.00
10	Deposit: If search exceeds 6 hours	One third of amount per request calculated in terms of items 2 to 8.
11	Postage, e-mail or any other electronic transfer	Actual expense, if any.



**INFORMATION  
REGULATOR  
(SOUTH AFRICA)**

*Ensuring protection of your personal information  
and effective access to information*

Address: JD House, 27 Stiemens Street  
Braamfontein, Johannesburg, 2001  
P.O. Box 31533  
Braamfontein, Johannesburg, 2017  
Tel: 010 023 5200  
Email: [PAIACompliance@infoRegulator.org.za](mailto:PAIACompliance@infoRegulator.org.za)

## REQUEST FOR A COPY OF THE GUIDE

### FORM 1: Request a copy from the Information Regulator

[Regulation 2]

I,

Full names:			
In my capacity as (mark with "x"):	Information officer		Other
Name of *public/private body (if applicable)			
Postal Address:			
Street Address:			
E-mail Address:			
Facsimile:			
Contact numbers:	Tel.(B):		Cellular:

hereby request the following copy(ies) of the Guide:

Language (mark with "X")	No of copies	Language (mark with "X")	No of copies
<input type="checkbox"/> Sepedi		<input type="checkbox"/> Sesotho	
<input type="checkbox"/> Setswana		<input type="checkbox"/> siSwati	
<input type="checkbox"/> Tshivenda		<input type="checkbox"/> Xitsonga	
<input type="checkbox"/> Afrikaans		<input type="checkbox"/> English	
<input type="checkbox"/> isiNdebele		<input type="checkbox"/> isiXhosa	
<input type="checkbox"/> isiZulu			

Manner of collection (mark with "x"):

Personal collection	Postal address	Facsimile	Electronic communication (Please specify)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of requester

# REQUEST FOR A COPY OF THE GUIDE

## FORM 1: Request from the Information Officer

[Regulation 3]

**TO:** The Information Officer

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I,

Full names:			
In my capacity as (mark with "x"):	Information officer		Other
Name of *public/private body (if applicable)			
Postal Address:			
Street Address:			
E-mail Address:			
Facsimile:			
Contact numbers:	Tel.(B):		Cellular:

Hereby request the following copy (ies) of the Guide:

Language (mark with "X")	No of copies	Language (mark with "X")	No of copies
Sepedi		Sesotho	
Setswana		siSwati	
Tshivenda		Xitsonga	
Afrikaans		English	
isiNdebele		isiXhosa	
isiZulu			

Manner of collection (mark with "x"):

Personal collection	Postal address	Facsimile	Electronic communication (Please specify)

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of requester

# OUTCOME OF REQUEST AND FEES PAYABLE

## FORM 3 [Regulation 8]

**Note:**

1. If your request is granted the—
  - (a) amount of the deposit, (if any), is payable before your request is processed; and
  - (b) requested record/portion of the record will only be released once proof of full payment is received.
2. Please use the reference number hereunder in all future correspondence.

Reference number: \_\_\_\_\_

**TO:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Your request dated \_\_\_\_\_, refers.

**1. You requested:**

Personal inspection of information at registered address of public/private body ( <i>including listening to recorded words, information which can be reproduced in sound, or information held on computer or in an electronic or machine-readable form</i> ) is free of charge. You are required to make an appointment for the inspection of the information and to bring this Form with you. If you then require any form of reproduction of the information, you will be liable for the fees prescribed in Annexure B.	
---	--

**OR**

**2. You requested:**

Printed copies of the information ( <i>including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form</i> )	
Written or printed transcription of virtual images ( <i>this includes photographs, slides, video recordings, computer-generated images, sketches, etc</i> )	
Transcription of soundtrack ( <i>written or printed document</i> )	
Copy of information on flash drive ( <i>including virtual images and soundtracks</i> )	
Copy of information on compact disc drive ( <i>including virtual images and soundtracks</i> )	
Copy of record saved on cloud storage server	

**3. To be submitted:**

Postal services to postal address	
Postal services to street address	
Courier service to street address	
Facsimile of information in written or printed format ( <i>including transcriptions</i> )	
E-mail of information ( <i>including soundtracks if possible</i> )	
Cloud share/file transfer	
Preferred language: ( <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> )	

Kindly note that your request has been:

Approved

Denied, for the following reasons:



--

**4. Fees payable with regards to your request:**

Item	Cost per A4-size page or part thereof/item	Number of pages/items	Total
Photocopy			
Printed copy			
For a copy in a computer-readable form on:			
(i) Flash drive	R40.00		
• To be provided by requestor			
(ii) Compact disc	R40.00		
• If provided by requestor			
• If provided to the requestor	R60.00		
For a transcription of visual images per A4-size page	Service to be outsourced. Will depend on the quotation of the service provider		
Copy of visual images			
Transcription of an audio record, per A4-size	R24.00		
Copy of an audio record			
(i) Flash drive	R40.00		
• To be provided by requestor			
(ii) Compact disc	R40.00		
• If provided by requestor			
• If provided to the requestor	R60.00		
Postage, e-mail or any other electronic transfer:	Actual costs		
<b>TOTAL:</b>			

**5. Deposit payable (if search exceeds six hours):**

Yes  No

Hours of search	Amount of deposit (calculated on one third of total amount per request)

The amount must be paid into the following Bank account:

Name of Bank: \_\_\_\_\_  
 Name of account holder: \_\_\_\_\_  
 Type of account: \_\_\_\_\_  
 Account number: \_\_\_\_\_  
 Branch Code: \_\_\_\_\_  
 Reference Nr: \_\_\_\_\_  
 Submit proof of payment to: \_\_\_\_\_

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
 Information officer

**Annexure E OBJECTION TO THE PROCESSING OF PERSONAL INFORMATION IN TERMS OF SECTION 11(3) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO 4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018**  
[Regulation 2]

Note:

- 1 *Affidavits or other documentary evidence as applicable in support of the objection may be attached.*
- 2 *If the space provided for in this form is inadequate, submit information as an annexure to this form and sign each page.*
- 3 *Complete as applicable.*

<b>A</b>	<b>DETAILS OF DATA SUBJECT</b>
Name(s) and surname/registered name of data subject:	
Unique identifier/ Identity number	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number/E-mail address:	
<b>B</b>	<b>DETAILS OF RESPONSIBLE PARTY</b>
Name(s) and surname/ Registered name of responsible party:	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number/E-mail address:	
<b>C</b>	<b>REASONS FOR OBJECTION IN TERMS OF SECTION 11(1)(d) to (f)</b> <i>(Please provide detailed reasons for the objection)</i>


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

.....  
*Signature of data subject/designated person*

**Annexure F REQUEST FOR CORRECTION OR DELETION OF PERSONAL INFORMATION OR DESTROYING OR DELETION OF RECORD OF PERSONAL INFORMATION IN TERMS OF SECTION 24(1) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO 4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018**  
[Regulation 3]

- Note:*
- 1 *Affidavits or other documentary evidence as applicable in support of the request may be attached.*
  - 2 *If the space provided in this form is inadequate, submit information as an annexure to this form and sign each page.*
  - 3 *Complete as applicable.*

Mark the appropriate box with an "x".

**Request for:**

Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.

Destroying or deletion of a record of personal information about the data subject which is in possession or under the control of the responsible party and who is no longer authorised to retain the record of information.

<b>A</b>	<b>DETAILS OF THE DATA SUBJECT</b>
Name(s) and surname/registered name of data subject:	
Unique identifier/ Identity number:	
Residential, postal or business address:	
	Code (     )
Contact number(s):	
Fax number/E-mail address:	
<b>B</b>	<b>DETAILS OF RESPONSIBLE PARTY</b>
Name(s) and surname/registered name of responsible party:	
Residential, postal or business address:	
	Code (     )
Contact number(s):	
Fax number/E-mail address:	
<b>C</b>	<b>INFORMATION TO BE CORRECTED/DELETED/ DESTROYED/</b>

<b>DESTROYED</b>	
<b>D</b>	<b>REASONS FOR*CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(a) WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY; and or REASONS FORDESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(b) WHICH THE RESPONSIBLE PARTY IS NO LONGER AUTHORISED TO RETAIN.</b> <i>(Please provide detailed reasons for the request)</i>

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

.....  
*Signature of data subject/designated person*

**INTERNAL APPEAL FORM****FORM 4**

[Regulation 9]

Reference Number: .....

PARTICULARS OF PUBLIC BODY				
Name of Public Body				
Name and Surname of Information Officer:				
PARTICULARS OF COMPLAINANT WHO LODGES THE INTERNAL APPEAL				
Full Names				
Identity Number				
Postal Address				
Contact Numbers	Tel. (B)		Facsimile	
	Cellular			
E-Mail Address				
Is the internal appeal lodged on behalf of another person?			Yes	<input type="checkbox"/>
			No	<input type="checkbox"/>
If answer is "yes", capacity in which an internal appeal on behalf of another person is lodged: <i>(Proof of the capacity in which appeal is lodged, if applicable, must be attached.)</i>				
PARTICULARS OF PERSON ON WHOSE BEHALF THE INTERNAL APPEAL IS LODGED <i>(If lodged by a third party)</i>				
Full Names				
Identity Number				
Postal Address				
Contact Numbers	Tel. (B)		Facsimile	
	Cellular			
E-Mail Address				

<b>DECISION AGAINST WHICH THE INTERNAL APPEAL IS LODGED</b> <i>(mark the appropriate box with an "X")</i>	
Refusal of request for access	
Decision regarding fees prescribed in terms of section 22 of the Act	
Decision regarding the extension of the period within which the request must be dealt with in terms of section 26(1) of the Act	
Decision in terms of section 29(3) of the Act to refuse access in the form requested by the requester	
Decision to grant request for access	
<b>GROUNDS FOR APPEAL</b> <i>(If the provided space is inadequate, please continue on a separate page and attach it to this form. all the additional pages must be signed)</i>	
State the grounds on which the internal appeal is based:	
State any other information that may be relevant in considering the appeal:	

You will be notified in writing of the decision on your internal appeal. Please indicate your preferred manner of notification:

Postal address	Facsimile	Electronic communication <i>(Please specify)</i>

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Signature of Appellant/Third party**

-----

**FOR OFFICIAL USE**  
**OFFICIAL RECORD OF INTERNAL APPEAL**

Appeal received by: <i>(state rank, name and surname of Information Officer)</i>				
Date received:				
Appeal accompanied by the reasons for the information officer's decision and, where applicable, the particulars of any third party to whom or which the record relates, submitted by the information officer:				Yes <input type="checkbox"/>
				No <input type="checkbox"/>
<b>OUTCOME OF APPEAL</b>				
Refusal of request for access. Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Fees (Sec 22). Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Extension (Sec 26(1)). Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Access (Sec 29(3)). Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Request for access granted. Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Relevant Authority**





**INFORMATION  
REGULATOR  
(SOUTH AFRICA)**

*Ensuring protection of your personal information  
and effective access to information*

Address: JD House, 27 Stiemens Street  
Braamfontein, Johannesburg, 2001  
P.O. Box 31533  
Braamfontein, Johannesburg, 2017  
Tel: 010 023 5200  
Email: [PAIAComplaints@infoRegulator.org.za](mailto:PAIAComplaints@infoRegulator.org.za)

## COMPLAINT FORM

### FORM 5

[Regulation 10]

#### NOTE:

1. This form is designed to assist the Requester or Third Party (hereinafter referred to as "the Complainant") in requesting a review of a Public or Private Body's response or non-response to a request for access to records under the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000) ("PAIA"). Please fill out this form and send it to the following email address: [PAIAComplaints@infoRegulator.org.za](mailto:PAIAComplaints@infoRegulator.org.za) or complete online complaint form available at <https://www.justice.gov.za/infoReg/>.
2. PAIA gives a member of the public a right to file a complaint with the Information Regulator about any of the nature of complaints detailed in part F of this complaint form.
3. It is the policy of the Information Regulator to defer investigating or to reject a complaint if the Complainant has not first given the public or private body (herein after referred to as "the Body") an opportunity to respond to and attempt to resolve the issue. To help the Body address your concerns prior to approaching the Information Regulator, you are required to complete the prescribed **PAIA Form 2** and submit it to the Body.
4. A copy of this Form will be provided to the Body that is the subject of your complaint. The information you provide on this form, attached to this form or that you supply later, will only be used to attempt to resolve your dispute, unless otherwise stated herein.
5. The Information Regulator will only accept your complaint once you confirm having complied with the prerequisites below.
6. **Please attach copies of the following documents, if you have them:**
  - a. Copy of the form to the Body requesting access to records;
  - b. The Body's response to your complaint or access request;
  - c. Any other correspondence between you and the Body regarding your request;
  - d. Copy of the appeal form, if your complaint relate to a public body;
  - e. The Body's response to your appeal;
  - f. Any other correspondence between you and the Body regarding your appeal;
  - g. Documentation authorizing you to act on behalf of another person (if applicable);
  - h. Court Order or Court documents relevant to your complaint, if any.
7. If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.

#### CAPACITY OF PERSON/PARTY LODGING A COMPLAINT

(Mark with an "X")

Complainant Personally

Representative of Complainant

Third Party

#### PREREQUISITES

Did you submit request (PAIA form) for access to record of a public/private body?	Yes		No	
Has 30 days lapsed from the date on which you submitted your PAIA form?	Yes		No	
Did you exhaust all the internal appeal procedure against a decision of the Information officer of a public body?	Yes		No	
Have you applied to Court for appropriate relief regarding this matter?	Yes		No	

<b>FOR INFORMATION REGULATOR'S USE ONLY</b>			
Received by: (Full names)			
Position			
Signature			
Complaint accepted	Yes		No
Reference Number			
Date stamp			

Postal address	Facsimile	Other electronic communication (Please specify)	

<b>PART A PERSONAL INFORMATION OF COMPLAINANT</b>			
Full Names			
Identity Number			
Postal Address			
Street Address			
E-Mail Address			
Contact numbers	Tel. (B)		Facsimile
	Cellular		

<b>PART B REPRESENTATIVE INFORMATION</b>			
<i>(Complete only if you will be represented. A Power of Attorney must be attached if complainant is represented, failing which the complaint will be rejected)</i>			
Full Names of Representative			
Nature of representation			
Identity Number / Registration Number			
Postal Address			
Street Address			
E-mail Address			
Contact Numbers	Tel. (B)		Facsimile
	Cellular		

<b>PART C THIRD PARTY INFORMATION</b>			
<i>(Please attach letter of authorisation)</i>			
Type of Body	Private		Public
Name of Public / Private Body			
Registration Number (if any)			
Name, Surname and Title of person authorised to lodge a complaint			
Postal Address			
Street Address			
E-mail Address			

Contact Numbers	Tel. (B):		Facsimile	
	Cellular			
<b>PART D</b>				
<b>BODY AGAINST WHICH THE COMPLAINT IS LODGED</b>				
Type of body	Private		Public	
Name of public / private body				
Registration number (if any)				
Name, surname and title of person you dealt with at the public or private body to try to resolve your complaint or request for access to information				
Postal Address				
Street Address				
E-mail Address				
Contact Numbers	Tel. (B):		Facsimile	
	Cellular			
Reference Number given (if any)				
<b>PART E</b>				
<b>COMPLAINT</b>				
<i>Tell us about the steps you have taken to try to resolve your complaint (Complaints should first be submitted directly to the public or private body for response and possible resolution)</i>				
Date on which request for access to records submitted.				
Please specify the nature of the right(s) to be exercised or protected, if a complaint is against a private body.				
Have you attempted to resolve the matter with the organisation?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, when did you receive it? (Please attach the letter to this application.)				
Did you appeal against a decision of the information officer of the public body?	Yes	<input type="checkbox"/>		<input type="checkbox"/>
If yes, when did you lodge an appeal?				
Have you applied to Court for appropriate relief regarding this matter?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please indicate when was the matter adjudicated by the Court? Please attach Court Order, if there is any.				
<b>PART F</b>				
<b>DETAILED TYPE OF ACCESS TO RECORDS</b>				
<i>(Please select one or more of the following to describe your complaint to the Information Regulator)</i>				
Unsuccessful appeal (Section 77A(2)(a) or section 77A(3)(a) of PAIA)	<i>I have appealed against the decision of the public body and the appeal is unsuccessful.</i>			
Unsuccessful application for condonation (Sections 77A(2)(b) and 75(2) of PAIA)	<i>I filed my appeal against the decision of the public body late and applied for condonation. The condonation application was dismissed.</i>			

Refusal of a request for access (Section 77A(2)(c)(i) or 77A(2)(d)(i) or 77A(3)(b) of PAIA)	<i>I requested access to information held by a body and that request was refused or partially refused.</i>	
The body requires me to pay a fee and I feel it is excessive (Sections 22 or 54 of PAIA)	<i>Tender or payment of the prescribed fee.</i>	
	<i>The tender or payment of a deposit.</i>	
Repayment of the deposit (Section 22(4) of PAIA)	<i>The information officer refused to repay a deposit paid in respect of a request for access which is refused.</i>	
Disagree with time extension (Sections 26 or 57 of PAIA)	<i>The body decided to extend the time limit for responding to my request, and I disagree with the requested time limit extension or a time extension taken to respond to my access request.</i>	
Form of access denied (Section 29(3) or 60(a) of PAIA)	<i>I requested access in a particular and reasonable form and such form of access was refused.</i>	
Deemed refusal (Section 27 or 58 of PAIA)	<i>It is more than 30 days since I made my request and I have not received a decision.</i>	
	<i>Extension period has expired and no response was received.</i>	
Inappropriate disclosure of a record (Mandatory grounds for refusal of access to record)	<i>Records (that are subject to the grounds for refusal of access) have inappropriately/unreasonable been disclosed.</i>	
No adequate reasons for the refusal of access (Section 56(3)(a) of PAIA)	<i>My request for access is refused, and no valid or adequate reasons for the refusal, were given, including the provisions of this Act which were relied upon for the refusal.</i>	
Partial access to record (Section 28(2) or 59(2) of PAIA)	<i>Access to only a part of the requested records was granted and I believe that more of the records should have been disclosed.</i>	
Fee waiver (Section 22(8) or 54(8) of PAIA)	<i>I am exempt from paying any fee and my request to waive the fees was refused.</i>	
Records that cannot be found or do not exist (Section 23 or 55 of PAIA)	<i>The Body indicated that some or all of the requested records do not exist and I believe that more records do exist.</i>	
Failure to disclose records	<i>The Body decided to grant me access to the requested records, but I have not received them.</i>	<input type="checkbox"/>
No jurisdiction (exercise or protection of any rights) (Section 50(1)(a) of PAIA)	<i>The Body indicated that the requested records are excluded from PAIA and I disagree.</i>	
Frivolous or vexatious request (Section 45 of PAIA)	<i>The Body indicated that my request is manifestly frivolous or vexatious and I disagree.</i>	
Other ( <i>Please explain</i> )		
<b>PART G EXPECTED OUTCOME</b>		
How do you think the Information Regulator can assist you? Describe the result or outcome that you seek.		
<b>PART H AGREEMENTS</b>		

**The legal basis for the following agreements is explained in the Privacy Notice on how to file your complaint document. In order for the Information Regulator to process your complaint, you need to check each one of the checkboxes below to show your agreement:**

*I agree that the Information Regulator may use the information provided in my complaint to assist it in researching issues relating to the promotion of the right of access to information as well as the protection of the right to privacy in South Africa. I understand that the Information Regulator will never include my personal or other identifying information in any public report, and that my personal information is still protected by the Protection of Personal Information Act, 2013 (Act No. 4 of 2013). I understand that if I do not agree, the Information Regulator will still process my complaint.*

*The information in this Complaint Form is true to the best of my knowledge and belief.*

*I authorize the Information Regulator to collect my personal complaint information (such as the information about me in this complaint form) and use it to process my human rights complaint relating to the right of access to information and / or the protection of the right to privacy.*

*I authorise anyone (such as an employer, service provider, witness) who has information needed to process my complaint to share it with the Information Regulator. The Information Regulator can obtain this information by talking to witnesses or asking for written records. Depending on the nature of the complaint, these records could include personnel files or employer data, medical or hospital records, and financial or taxpayer information.*

*If any of my contact information changes during the complaint process, it is my responsibility to inform the Information Regulator; otherwise my complaint could experience a delay or even be closed.*

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Complainant/Representative/Authorised person of Third party**



**INFORMATION  
REGULATOR  
(SOUTH AFRICA)**

*Ensuring protection of your personal information  
and effective access to information*

Address: JD House, 27 Stiemens Street  
Braamfontein, Johannesburg, 2001  
P.O. Box 31533  
Braamfontein, Johannesburg, 2017  
Tel: 010 023 5200  
Email: [PAIACompliance@infoRegulator.org.za](mailto:PAIACompliance@infoRegulator.org.za)

## REQUEST FOR ASSESSMENT

### FORM 13

[Regulation 14(1)]

I,

<b>Full Names</b>			
<b>Postal Address</b>			
<b>Street Address</b>			
<b>E-Mail Address</b>			
<b>Contact Numbers</b>	<b>Tel. (B)</b>		<b>Facsimile</b>
	<b>Cellular</b>		

hereby, in terms of section 77H of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000), request that the Information Regulator assess whether the under-mentioned public or private body generally complies with the provisions of the Act insofar as its policies and implementation procedures are concerned.

<b>Name of Private / Public Body</b>			
<b>Postal Address</b>			
<b>Street Address</b>			
<b>E-Mail Address</b>			
<b>Contact Numbers</b>	<b>Tel. (B)</b>		<b>Facsimile</b>
	<b>Cellular</b>		

<b>PARTICULARS OF INFORMATION TO BE ASSESSED</b>
<b>PERSONS AFFECTED BY THE RELEVANT INFORMATION PRACTICE/S</b>
<b>THE REASON WHY AN ASSESSMENT IS REQUESTED</b>
<b>SPECIFIC ASPECTS OF THE INFORMATION THAT THE ASSESSMENT SHOULD ADDRESS</b>

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
**Requester**