

REQUEST FOR ACCESS TO RECORD

[Section 53(1) of the Promotion of Access to Information Act, 2000
(Act No. 2 of 2000)]

A. Particulars of GRInc.

GRINC.
REGUS OFFICES
7TH FLOOR MANDELA RHODES BUILDING
CORNER WALE AND BURG STREETS
CAPE TOWN
8000

B. Particulars of the person requesting access to the record

Note:

- (a) The particulars of the person who requests access to the record must be given below.
- (b) The address in the Republic and/or email 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:	
Postal address:	
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:

Form of access to a 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:

Mark the appropriate box below with an X.

Notes:

- (a) Compliance with your request 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 a 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 images	Transcription of images*
3. If records consist of words or information which can be reproduced in sound:				
	Listen to the soundtrack audio cassette		Transcription of soundtrack* written or printed document	
4. If a record is held on computer or in an electronic or machine-readable form:				
	A printed copy of record*		A printed copy of information derived from the record	Copy in computer-readable form* (stiffy or a compact disc)
* If you requested a copy or a record (above), do you wish the copy or transcription be posted to you? Postage is payable.		Yes	No	

F. Particulars of the right to be exercised or protected

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. Indicate which right is to be exercised or protected:

2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

G. Notice of decision regarding a 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:

H. Response time with respect to the request

The response time in relation to the request made would depend on the nature of the request, the number of records requested and the period for which the records are requested.

Requests will be acknowledged within 5 business days of receipt of the request and the requester will in due course be informed as to when the information would be available.

Signed at _____ this day of _____ 20__

SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE