

#### REPUBLIC OF SOUTH AFRICA

# FORM C

# REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY (Section 53(1) of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000)) [Regulation 10]

A. Particulars of private body BE Brave Consulting (pty)ltd Reg 2013/032164/07 9, 12<sup>th</sup> ave, Boston, 7530

# 1 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:												
Postal address:											 	
Telephone number:	(	)				. Fa	x numb	er:	(	)	 	
E-mail address: Capacity in which request is	s made.	when r	nade o	n behal	f of ano	ther pe	erson:				 	

## 2 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:							

#### 3 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:

Reference number, if available:
Any further particulars of record:

.....

### 4 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:

 	 	• • • • • • • • • • • • • • • • • • • •

## 5 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:

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.

	copy of record*	inspection of record	
If rec	ord consists of visual images -	· · ·	
(this	includes photographs, slides, v	ideo recordings, computer-generated	images, sketches, etc.):
	view the images	copy of the images*	transcription of the
			images*
	and a subject of us a subject wanted	or information which can be reproduced	ad in coundu
6. If rec	ora consists of recorded words	or information which can be reproduc	
3. If rec	listen to the soundtrack	transcription of soundtrack*	
3. If rec			
	listen to the soundtrack (audio cassette)	transcription of soundtrack*	
	listen to the soundtrack (audio cassette)	transcription of soundtrack* (written or printed document)	

### 6 G. Particulars of 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:

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

.....

H. 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 ..... of ...... year

.....

SIGNATURE OF REQUESTER /

PERSON ON WHOSE BEHALF REQUEST IS MADE