CHAPTER 5
MISCELLANEOUS

Electronic communication

15. The provisions of the Electronic Communications and Transactions Act, 2002, are applicable to all forms, records, documents or any information, which are electronically communicated.

Offences and penalties

16. An information officer who willfully or in a grossly negligent manner charges a fee other than the fee prescribed in terms of the Regulations, is guilty of an offence and liable on conviction to a fine or to imprisonment for a period not exceeding two years.

Repeal and transitional provisions

   (2) Anything done under a provision of a regulation repealed by subregulation (1) and which could have been done under a provision of these Regulations, is regarded as having been done under the latter provision.

Short title

18. These Regulations are called the Regulations relating to the Promotion of Access to Information, 2021.

ANNEXURE A
FORM 1
REQUEST FOR A COPY OF THE GUIDE
[Regulations 2 and 3]

TO: *The Information Regulator
    P.O Box 31533
    Braamfontein,
    2017
    E-mail address: inforeg@justice.gov.za
    Tel number: +27 (0) 10 023 5200

OR

*The information officer

________________________________________________________________________

I,

Full names:

In my capacity as (mark with "x"): Information officer Other

Name of *public/private

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

<table>
<thead>
<tr>
<th>Language (mark with &quot;X&quot;)</th>
<th>No of copies</th>
<th>Language (mark with &quot;X&quot;)</th>
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Manner of collection (mark with "X"):
- Personal collection
- Postal address
- Facsimile
- Electronic communication (Please specify)

Signed at __________________ this __________ day of __________ 20__________

Signature of requester

* Delete whichever is not applicable

FORM 2
REQUEST FOR ACCESS TO RECORD
[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
<table>
<thead>
<tr>
<th>Full names:</th>
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<tbody>
<tr>
<td>Identity number:</td>
<td></td>
</tr>
<tr>
<td>Capacity in which request is made (when made on behalf of another person):</td>
<td></td>
</tr>
<tr>
<td>Postal Address:</td>
<td></td>
</tr>
<tr>
<td>Street Address:</td>
<td></td>
</tr>
<tr>
<td>E-mail Address:</td>
<td></td>
</tr>
<tr>
<td>Contact numbers:</td>
<td>Tel. (B):</td>
</tr>
<tr>
<td>Cellular:</td>
<td></td>
</tr>
<tr>
<td>Full names of person on whose behalf request is made (if applicable):</td>
<td></td>
</tr>
<tr>
<td>Identity number:</td>
<td></td>
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<tr>
<td>Postal Address:</td>
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<td>Tel. (B):</td>
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<td>Cellular:</td>
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</tbody>
</table>

### PARTICULARS OF RECORD REQUESTED

*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.)*

<table>
<thead>
<tr>
<th>Description of record or relevant part of the record:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Reference number, if available:</td>
<td></td>
</tr>
<tr>
<td>Any further particulars of record:</td>
<td></td>
</tr>
</tbody>
</table>

### TYPE OF RECORD

*(Mark the applicable box with an "X")*

- Record is in written or printed form
- Record comprises virtual images *(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)*
- 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 *(including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form)*

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Written or printed transcription of virtual images (this includes photographs, slides, video recordings, computer-generated images, sketches, etc)
Transcription of soundtrack (written or printed document)
Copy of record on flash drive (including virtual images and soundtracks)
Copy of record on compact disc drive (including virtual images and soundtracks)
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 (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)
Postal services to postal address
Postal services to street address
Courier service to street address
Facsimile of information in written or printed format (including transcriptions)
E-mail of information (including soundtracks if possible)
Cloud share/file transfer
Preferred language:
(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)

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:

FEES
a) A request fee must be paid before the request will be considered.
b) You will be notified of the amount of the access fee to be paid.
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:

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:

<table>
<thead>
<tr>
<th>Postal address</th>
<th>Facsimile</th>
<th>Electronic communication (Please specify)</th>
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</table>
FORM 3
OUTCOME OF REQUEST AND OF FEES PAYABLE
[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.

TO: ________________________________

Reference number: ____________________

Your request dated ________________, refers.

1. You requested:
   - Personal inspection of information at registered address of public/private body (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) 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.

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

3. To be submitted:
   - Postal services to postal address