

FORM A
REQUEST FOR ACCESS TO RECORD OF PUBLIC BODY
(Section 18 (1) of the Promotion of Access to Information
Act, 2000
(Act No. 2 of 2000)
[Regulation 2]

FOR DEPARTMENTAL USE

Reference number: _____

Request received

by: MUNICIPAL MANAGER - JOSEPH CLOETE

(state rank, name and surname of information officer/deputy information officer) on
_____ (date) at _____ (place).

Request fee (if any): R _____

Deposit fee (if any): R _____

Access fee: R _____



SIGNATURE OF INFORMATION
OFFICER/DEPUTY
INFORMATION OFFICER

A. Particulars of public body

The Information Officer/Deputy Information Officer: Mr Chris Fortuin
Namakwa Municipality
Redelinghyuys Street
Springbok
8240

Telephone: 27277128000
Fax: 027 712 8040
Email: info@namakwa-dm.gov.za

B. Particulars of person requesting access to the record

- *The particulars of the person who requests access to the record must be recorded below.*
- *Furnish an address and/or fax number in the Republic to which information must be sent*
- *Proof of the capacity in which the request is made, if applicable, must be attached.*

Full names and surname: South African History Archive (SAHA)
Identity/Passport number: Non-Profit Trust No. 2522/93
Postal address: P.O.Box 31719, Braamfontein, 2017
Fax number: +27866491491
Telephone number: +27117182563
E-Mail Address: foip@saha.org.za

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

- *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 folio and attach it to this form. **The requester must sign all the additional folios.***

- Description of record or relevant part of the record:

For records related to the Regulation of Gatherings Act 205 of 1993.

1. Copies of notice of gathering templates in terms of section 3 of the Regulation of Gatherings Act.

2. The name, address, contact details, and area of jurisdiction of all persons designated in terms of section 2(4) of the Regulation of Gatherings Act as a “responsible officer” and a deputy responsible officer.

3. A list detailing:

3.1 The number of notices of gathering in terms of section 3 of the Regulation of Gatherings Act received since 1 January 2015 to date of submission of PAIA request;

3.2 The number of convener’s meetings in terms of section 4 of the Regulation of Gatherings Act held since 1 January 2015 to date of submission of PAIA request;

3.3 The number of gatherings prohibited or prevented in terms of section 5 of the Regulation of Gatherings Act since 1 January 2015 to date of submission of PAIA request, and the reasons for the prohibition or prevention;

3.4 The number of gatherings authorized with conditions in terms of section 4 of the Regulation of Gatherings Act since 1 January 2015 to date of submission of PAIA request; and

3.5 The number of gatherings authorized in terms of section 4 of the Regulation of Gatherings Act since 1 January 2015 to date of submission of PAIA request.

4. Copies of Training Manuals and Training Materials (but specifically excluding those done at the national level) relating to the conduct and / or training of persons designated in terms of section 2(4) of the Regulation of Gatherings Act as a “responsible officer”.

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

E. Fees

- *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.*
- *You will be notified of the amount required to be paid as the request fee.*
- *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.*
- *If you qualify for exemption of the payment of any fee, please state the reason for exemption.*

Reason for exemption from payment of fees:

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 hereunder, state your disability and indicate in which form the record is required.

Disability: _____	Form in which record is required: _____
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Mark the appropriate box with an "X".
NOTES:

- Your indication as to the required form of access depends on the form in which the record is available.
- 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 in printed form:

<input checked="" type="checkbox"/>	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	<input checked="" type="checkbox"/>	copy of the images*		transcription of the images*
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3. If record consists of recorded words or information which can be reproduced in sound:

	Listen to the soundtrack (audio cassette)	<input checked="" type="checkbox"/>	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*	<input checked="" type="checkbox"/>	Printed copy derived from the record*		copy in computer readable form*(stiffy or compact disc)
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	YES	NO
		<input checked="" type="checkbox"/>

<p>* If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you?</p> <p>A postal fee is payable.</p>		
<p><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></p>		
<p>In which language would you prefer the record? ENGLISH</p>		

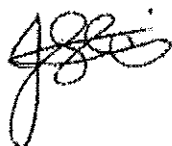
- **G. Notice of decision regarding request for access**

You will be notified in writing whether your request has been approved/denied. If you wish to be informed thereof 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?

IN WRITING, via email, to foip@saha.org.za

Signed at Johannesburg on this 26th day of August 2016.



SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE

Mr James Ekron (FOIP Advocacy Officer)

South African History Archive (SAHA)