SECTION 51 MANUAL FOR Granor Passi (1957/004128/07)

INFORMATION REQUIRED UNDER SECTION 51(1)(a) OF THE ACT

Postal Address of head of Granor Passi:

4 Kalsiet Street Magna Via Polokwane 0699

Physical Address of head of Granor Passi:

4 Kalsiet Street Magna Via Polokwane 0699

Tel. No of head of Granor Passi:

+27152986000

Fax. No of head of Granor Passi:

+27152988200

Email address of head of Granor Passi:

info@granorpassi.co.za

DESCRIPTION OF GUIDE REFERRED TO IN SECTION 10: SECTION 51(1)(b)

A guide has been compiled in terms of Section 10 of PAIA by **Granor Passi**. It contains information required by a person wishing to exercise any right, contemplated by PAIA.

This Guide is available for inspection, inter alia, at the office of the offices of **Granor Passi** at the physical address above and at the SAHRC.

THE LATEST NOTICE IN TERMS OF SECTION 52(2) (IF ANY):

At this stage no notice(s) has/have been published on the categories of records that are automatically available without a person having to request access in terms of PAIA.

ACTS AND OTHER LEGISLATION HELD AT PHYSICAL ADDRESS BY Granor Passi

Promotion of Access to Information Act 2 of 2000

SUBJECTS AND CATEGORIES OF RECORDS HELD AT PHYSICAL ADDRESS BY Granor Passi

DETAIL ON HOW TO MAKE A REQUEST FOR ACCESS - SECTION 51(e)

- The requester must complete Form B and submit this form together with a request fee, to the head of the private body
- The form must be submitted to the head of the private body at his/her address, fax number or email address
- The form must:
 - provide sufficient particulars to enable the head of the private body to identify the record/s requested and to identify the requester
 - o indicate which form of access is required
 - o specify a postal address or fax number of the request in the Republic
 - o identify the right that the requester is seeking to exercise or protect
 - provide an explanation of why the requested record is required for the exercise or protection of that right
 - o in addition to a written reply, the requester wishes to be informed of the decision on the request in any other manner, to state that the manner and the necessary particulars to be informed in the other manner, if the request is made on behalf of another person, to submit proof of capacity in which the requester is making the request, to the reasonable satisfaction of the head of the private body.

FORM B

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]

Particulars of private body

A.

1

2

3

В.	Particulars of person requesting access to the record	
(a) (b) (c)	(b) The address and/or fax number in the Republic to which the	information is to be sent must be given.
Full n	ıll names and surname:	
Identi	entity number:	
Posta	ostal address:	
Fax n	ax number:	
	ex number: E-mail address:	
	elephone number: E-mail address:	
Telep	elephone number: E-mail address: Capacity in which request is made, when made on behalf of a	
Telep	elephone number: E-mail address: Capacity in which request is made, when made on behalf of a	
Telep	elephone number: E-mail address: Capacity in which request is made, when made on behalf of a	nother person:
Telep	Plephone number: Capacity in which request is made, when made on behalf of a Particulars of person on whose behalf request is made	nother person:
Telep	Plephone number: Capacity in which request is made, when made on behalf of a Particulars of person on whose behalf request is made	nother person:
C. This s	Particulars of person on whose behalf request is made is section must be completed ONLY if a request for information is made	nother person:
C. This s	Particulars of person on whose behalf request is made Particulars of person on whose behalf request is made is section must be completed ONLY if a request for information is made all names and surname:	nother person:
C. This s	Particulars of person on whose behalf request is made Particulars of person on whose behalf request is made is section must be completed ONLY if a request for information is made all names and surname:	nother person:

(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.

Reference number, if available:

Any further particulars of record:

Description of record or relevant part of the 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:

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		
Form ir	n which record is required:				
Mark th	ne appropriate box with an X.				
(b) Ac info	ompliance with your request in ailable. cess in the form requested materized if access will be granted	y be refused in certain circumstad in another form.	on the form in which the record is ances. In such a case you will be ed partly by the form in which access		
1. If t	he record is in written or pri	nted form:			
	copy of record* inspection of record				
	cord consists of visual imag includes photographs, slides, v	es video recordings, computer-gene	erated images, sketches, etc)		
	view the images	copy of the images"	transcription of the images*		
3. If re		vords or information which car	3		
	listen to the soundtrack audio cassette transcription of soundtrack* written or printed document				
4. If re	ecord is held on computer or	in an electronic or machine-re	eadable form:		
	printed copy of record*	printed copy of information	copy in computer readable form*		

derived from the record"

'If you requested a copy or transcription of a record (above), do you wish the

copy or transcription to be posted to you?

Postage is payable.

(stiffy or compact disc)

NO

YES

\sim	Dandianlana af	-1-4 4 1		
Մ	Particulars of rig	ent to be	exercisea o	r protectea
		• • • • • • •		1

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:

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 info	rmed of the de	cision regarding y	our request for	access to the record?
Signed at	This	day of		20

SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE