# ANNEXURE A TO INFORMATION MANUAL FORM FOR REQUEST FOR ACCESS TO A RECORD OF STP INSURANCE BROKERS

#### **REQUEST FOR ACCESS TO RECORD OF A PRIVATE BODY**

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

### (Regulation 4)

## Particulars of private body

Postal Address	Physical Address			
The Information Officer	Warwick Place, 2 <sup>nd</sup> Floor, Buchanan Chambers			
PO Box 31417	Pearce Road, Claremont, 7700			
Tokai	Tel: +27 21 713 1500/510 2376			
7966	Fax: +27 21 671 2616/671 3077			
	E-mail: info@stpbrokers.co.za			
	Website: www.stpbrokers.co.za			

#### Particulars of person requesting access to the record

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a) b) c)	The particulars of the person who requests access to the records 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 nam	es and surname					
Identity number						
Postal ad	ddress					
Telepho	ne number		Fax number			
E-mail ad	ddress					
Capacity in which request is made, when made on behalf of another person						

### A. 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				

## B. 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:					
Fees						
a)	A request for access to a record, other than a record cont	raining personal information about yourself, will be processed				
b)	only after a request fee has been paid.  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					
d)	required to search for and prepare a record.  If you qualify for exemption of the payment of any fee, please state the reason therefore.					
Reason f	or exemption from payment of fees					
Form of a	ccess to record					
		ecord in the form of access provided for in 1 to 4 hereunder,				
	ur disability and indicate in which form the record is require					
Disability	1	Form in which record is required				



Mark the	e appropriate box with an "X"	,							
a) b)	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 written or	printed form:							
	Copy of record*			Inspection	of record				
2.	If record consists of visual images: (this includes photographs, slides, video recordings, computer-generated images, sketches, etc.)								
	View the images	Copy o	f the image	s*		Transcription	n of the in	nages*	
3.	If record consists of recorde	ed words or inform	nation which	n can be rep	oroduced i	n sound:			
	Listen to the soundtrack (au	udio cassette)		Transcript	ion of sour	ndtrack* (wri	tten or pr	inted doc	ument)
4.	If record is held on compute	er or in an electror	nic or machi	ne-readable	e form:				
	Printed copy of record	Printed copy of record Printed copy of information derived from the record*  Copy in computer readable form* (flator)			n* (flash				
	equested a copy or transcription to be posted to you? A	·		ou wish the	copy or	YES		NO	
C.	C. Particulars of right to be exercised or protected:								
-	ovided space is inadequate puester must sign all the additi		a separate f	olio and att	tach it to tl	his form.			
Indicate which right is to be exercised or protected									
1.	Explain why the requested	record is required	for the exe	cising or pr	otection o	of the aforem	entioned	right	
D. Notice of decision regarding request for access:									
You will be notified in writing whether your request has been approved or 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?									



Signed at	this	day of	20
SIGNATURE OF REQUESTER/PERSON ON			
WHOSE BEHALF REQUEST IS MADE			

