

SCHEDULE 1

Request for access to record of public body
 (Section 18(1) of the Promotion of Access to Information Act, 2000 (Act 2 of 2000))
 [Regulation 6]

FOR DEPARTMENTAL USE

Reference number: _____

Request received by _____

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

Request fee (if R any: R Deposit (if R any: R Access fees: _____

SIGNATURE OF INFORMATION OFFICER/DEPUTY INFORMATION OFFICER

A. Particulars of public body

The Information Officer/Deputy Information Officer: Elias S. Sihole

National Department of Human Settlements

Private Bag X644, Pretoria, RSA

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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 surnames: Zaher Cassim

Identity number: 8610105084087

Postal address: 191 Jan Smuts Corner
Parktown North, 2193
SHB

Telephone number: 011 447 1472

E-mail address: n/a

Fax number: 011 447 2696

Capacity in which request is made, when made on behalf of another person: community member

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: Masisa Mkwanazi

Identity number: 59050927089

1	If the record is in written or printed form:	<input checked="" type="checkbox"/>	Copy of record*	Inspection of record
2	If record consists of virtual images- (this includes photographs, slides, video recordings, computer-generated images, sketches, etc.):	<input type="checkbox"/>	View the images	Copy the images*
3	If record consists of recorded words or information which can be reproduced in sound:	<input type="checkbox"/>	Listen to the soundtrack (audio cassette)	Transcription of soundtrack* (written or printed document)
4	If record is held on computer or in an electronic or machine-readable form:	<input checked="" type="checkbox"/>	Printed copy of record*	Printed copy of information derived from the record*
			Copy in computer readable form* (stiffy or compact disc)	

F. Form of access to record

If you are prevented by a disability to read, view or listen to the record i 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: _____

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.

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.

(a) You will be notified of the amount required to be paid as the request fee.
 (b) 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: _____

D. Particulars of record

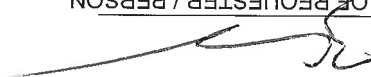
(a) Provide full particulars of the record to which access is requested, including the reference number if that is known to you, to enable the record to be located.
 (b) If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.

1 Description of record or relevant part of the record: RDP application form for Masezi Mkwanazi ID no. 59050927089, receipt no. 336789 explaining why she was rejected on RDP house.

2 Reference number, if available: Receipt no. 336789

3 Any further particulars of record: _____

SIGNATURE OF REQUESTER / PERSON
ON WHOSE BEHALF REQUEST IS MADE



Signed at CW offices (JHB) this 28 day of Feb 20 13

How would you prefer to be informed of the decision regarding your request for access to the record?
Please 8 by mail.

G. Notice of decision of 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.

* If you requested a copy of transcription of a record (above), do you wish the copy or transcription to be posted to you?		YES	NO
Postage is payable			
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.			
In which language would you prefer the record? <u>English</u>			