

#### FORM 3

#### **OUTCOME OF REQUEST AND 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.

Reference number:			
TO:			
Your request dated	, refers.		



#### 1. You requested:

Personal inspection of information at registered addresses of public/private bodies (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 A.

OR

### 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	
Postal services to street address	
Courier service to street address	
Facsimile of information in written or printed format (including transcriptions)	ļ
E-mail of information (including soundtracks if possible)	
Cloud share/file transfer	
Preferred language:	I
(Note that if the record is not available in the language you prefer, access	I
may be granted in the language in which the record is available)	
Vindly note that your request has	
Kindly note that your request has	
Been Approved.	
Denied, for the following reasons:	
	- 1



### 4. Fees payable with regard to your request:

<u>Item</u>	<u>Description</u>	<u>Amount</u>	Number of	<u>Total:</u>
		D 1 40 00	<u>pages/items</u>	
1.	The request fee payable by	R 140.00		
	every requester			
2.	Photocopy/printed black &	R 2.00 per page or		
	white copy of A4-size page	part thereof		
3.	Printed copy of A4-size page	R 2.00 per page or		
		part thereof		
4.	For a copy of computer-readable form on: (i) Flash drive (to be provided by the requestor) (ii) Compact Disk: a. If provided by requester b. If provided to the	R 40.00 R 40.00 R 60.00		
	requester			
5.	For a transcription of visual images per A4-size page	Service to be outsourced. Will		
6.	For a copy of visual images	depend on quotation from service provider.		
7.	Transcription of an audio record, per A4-size page	R 24.00		
8.	For a copy of audio recording on:  (i) Flash drive (to be provided by the requestor)  (ii) Compact Disk:	R 40.00		



	a. If provided by requester	R 60.00
	b. If provided to the	
	requester	
9.	To search for and prepare the record for disclosure, for each hour or part of an hour, excluding the first hour, reasonably required for such search and preparation.	R 145.00
	Not to exceed a total cost of	R 435.00
10.	Deposit: If search exceeds 6 hours	One third of the amount per request calculated in terms of items 2 to 8.
11.	Postage, email, or any other electronic transfer	Actual expense, if any.
	TOTAL:	



5. Deposit pa	ayable (if search exceeds six hours):		
Yes			No
Hours of search		Amount of deposit (calculated on one third of t amount per request)	otal
The amount must b	pe paid into the	e following Bank account:	
Name of Bank:			
Name of account	holder:		
Type of account:			
Account number:			
Branch Code:			
Reference No.:			
Submit proof of po	nyment to:		
Signed at	this _	day of	20

Information officer