

**ACCESS TO INFORMATION MANUAL
(PRIVATE BODY)**

**PREPARED IN TERMS OF SECTION 51 OF THE PROMOTION
OF ACCESS TO INFORMATION ACT 2 OF 2000**

1. Purpose of the Manual in terms of PAIA

The purpose of this Manual is to assist people wishing to access information in terms of the PAIA from Finconsult (Pty) Ltd.

2. Request for access to information

In the event that a person or entity requires access to information as contemplated in the Act, the requester must contact:

Neil Harvey

Tel no: 011 432 1513

Email: neil@fnc.co.za

In terms of section 25 (2) states that:

If the request for access is granted, the notice in terms of subsection (1) (b) must state:

- A. **The access** fee (if any) to be paid upon access;
- B. The form in which access will be given; and
- C. That the requested may lodge an internal appeal or an application with a court, as the case may be, against the access fee to be paid or the form of access granted, and the procedure (including the period) for lodging the internal appeal or application, as the case may be.

If the request for access is refused, the notice in terms of subsection (1) (b) must:

- A. State adequate reasons for the refusal. Including the provisions of this Act relied upon;
- B. Exclude, from such reasons, any reference to the content of the record; and
- C. State that the requested may lodge an internal appeal or an application with a court, as the case may be, against the refusal of the request, and the procedure (including the period) for lodging the internal appeal or application, as the case may be.

3. Terms used in this document

- A. Terms defined on the act shall have the meaning set out therein;
- B. Reference to sections shall be a reference to sections in the Act.

4. Background of Finconsult (Pty) Ltd

Firm providing Accounting, Tax and payroll services.

5. Organisation Details

- A. Name: Finconsult (Pty) Ltd
- B. Physical Address: 47 Voortrekker Street
South Crest
Alberton
South Africa
1449
- C. Postal Address: 47 Voortrekker Street
South Crest
Alberton
South Africa
1449
- D. Contact Details: Tel no: 011 432 1513
Email: info@fnc.co.za
- E. Website Address: www.fnc.co.za

6. Section 51 (1) (d)

The manual describes those records which Finconsult (Pty) Ltd makes available in terms of any other legislation.

Acts that are applicable to Finconsult (Pty) Ltd:

- Attorneys Act 53 of 1979
- Basic Conditions of Employment Act 75 of 1997
- Closed Corporations amendment Act 25 of 2005
- Companies Act 71 of 2008
- Compensation for Occupational Injuries and Diseases Act 130 of 1993
- Competition Act 89 of 1998
- Consumer Protection Act 68 of 2008
- Copyright Act 61 of 1978

- Electronic Communications and Transactions Act 25 of 2002
- Employment Equity Act 55 of 1998
- Financial Advisory and Intermediary Services Act no 37 of 2002
- Financial Intelligence Centre Act 38 of 2001
- Income Tax Act 58 of 1962
- Insolvency Act 24 of 1936
- Insurance Act 27 of 1943
- Intellectual Property Laws Amendments Act 38 of 1997
- Interception and Monitoring Prohibition Act 127 of 1992
- Labour Relations Act 66 of 1995
- Long Term Insurance Act 52 of 1998
- Non-Profit Organisations Act 71 of 1997
- Occupational Health and Safety Act 85 of 1993
- Prevention of Organised Crime Act 121 of 1998
- Protection of Business Act 99 of 1978
- Regional Services Councils Act 109 of 1985
- Sectional Titles Act 95 of 1986
- Short Term Insurance Act 53 of 1998
- Skills Development Levies Act 9 of 1999
- Stamp Duties Act 77 of 1968
- The Co-operatives Act 14 of 2005
- The Fund-Raising Act 107 of 1978
- The National Credit Act 34 of 2005
- Trade Marks Act 194 of 1993
- Trust Property Control Act 57 of 1988
- Unemployment Insurance Act 63 of 2001
- Unemployment Insurance Conditions Act 4 of 2002
- Value Added Tax Act 89 of 1991

7. Section 51 (1) (e)

This section of the manual sets out a description of the subjects on which Finconsult (Pty) Ltd holds record, and categories of records held on each subject. These include operational records of our organisation utilised in the day to day running administration of its administration, such as:

- A. Accounting records
- B. Information Technology
- C. Intellectual Property
- D. Personnel Records
- E. Marketing
- F. Statutory Company Records
- G. Client Databases

- H. Internal Phone Lists
- I. Policies
- J. Directives
- K. Minutes of Meetings
- L. Administrative Information

8. Requesting Procedure

A person who wants access to the records must complete the necessary request form, as set out in Annexure 1(Form 2), and the completed form must be sent to the address or e-mail.

Email: neil@fnc.co.za provided in this manual and marked for the attention of the information officer.

The requester must indicate which form of access is required, and identify the right that is sought to be exercised or protected, and provide an explanation of which the requested record is required for the exercise or protection of that right. Proof of the capacity in which the requested is requesting the information.

9. Requesting Procedure

- 9.1 This manual is available for inspection by the general public upon request during office hours.
- 9.2 Copies may also be requested form the South African Human Rights Commission at the address indicated below.

10. Fees

A requester who seeks access to a record containing personal information about that requested is not required to pay the requested fees. Any other requester who is not a personal requester must pay the required fee:

- 10.1 A fee will be required by the head (contact person) before further processing of the request in terms of S54 of the Act.
- 10.2 A requester fee of R 50 should be paid, this amount will be refunded should the request for access be refused
- 10.3 A portion of access fee (not more than one third) may be required before the requested is considered.

- 10.4 The requester may lodge an application with a court against the payment of the request fee in terms of S54(3)(b) of the Act.
- 10.5 The head may withhold a record until the requester has paid the applicable fees.

11. Details of the South African Human Rights Commission

Any queries with regard to this manual should be directed to:

The South African Human Rights Commission; PAIA Unit

Research and Documentation Department

Private Bag 2700

Houghton

2041

Phone: 011 484 8300

Fax: 011 484 0582

Email: PAIA@sahrc.org.za

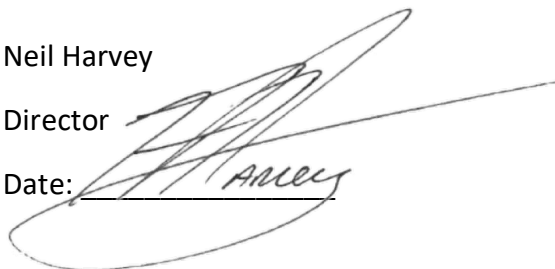
Website: www.sahrc.org.za

This Manual is compiled on behalf of Finconsult (Pty) Ltd by:

Neil Harvey

Director

Date:

A large, stylized handwritten signature in black ink, appearing to read 'Neil Harvey', is written over the 'Date:' label and extends across the 'Director' label.

FORM 2

REQUEST FOR ACCESS TO RECORD

[Regulation 7]

NOTE:

1. Proof of identity must be attached by the requester.
2. If requests made on behalf of another person, proof of such authorisation, must be attached to this form.

TO: The Information Officer

(Address)

E-mail address:

Fax number:

Mark with an "X"

Request is made in my own name

Request is made on behalf of another person.

PERSONAL INFORMATION			
Full Names			
Identity Number			
Capacity in which request is made <i>(when made on behalf of another person)</i>			
Postal Address			
Street Address			
E-mail Address			
Contact Numbers	Tel. (B):		Facsimile: <input type="text"/>
	Cellular:		
Full names of person on whose behalf request is made <i>(if applicable):</i>			
Identity Number			
Postal Address			

Street Address			
E-mail Address			
Contact Numbers	Tel. (B)		Facsimile
	Cellular		
PARTICULARS OF RECORD REQUESTED			
<i>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 page and attach it to this form. All additional pages must be signed.)</i>			
Description of record or relevant part of the record:			
Reference number, if available			
Any further particulars of record			
TYPE OF RECORD <i>(Mark the applicable box with an "X")</i>			
Record is in written or printed form			
Record comprises virtual images <i>(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)</i>			
Record consists of recorded words or information which can be reproduced in sound			
Record is held on a computer or in an electronic, or machine-readable form			

FORM OF ACCESS
(Mark the applicable box with an "X")

Printed copy of record <i>(including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form)</i>	
Written or printed transcription of virtual images <i>(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)</i>	
Transcription of soundtrack <i>(written or printed document)</i>	
Copy of record on flash drive <i>(including virtual images and soundtracks)</i>	
Copy of record on compact disc drive <i>(including virtual images and soundtracks)</i>	
Copy of record saved on cloud storage server	

MANNER OF ACCESS
(Mark the applicable box with an "X")

Personal inspection of record at registered address of public/private body <i>(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)</i>	
Postal services to postal address	
Postal services to street address	
Courier service to street address	
Facsimile of information in written or printed format <i>(including transcriptions)</i>	
E-mail of information <i>(including soundtracks if possible)</i>	
Cloud share/file transfer	
Preferred language <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>	

PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED

If the provided space is inadequate, please continue on a separate page and attach it to this Form. The requester must sign all the additional pages.

Indicate which right is to be exercised or protected	

Explain why the record requested is required for the exercise or protection of the aforementioned right:	

FEEES	
a)	<i>A request fee must be paid before the request will be considered.</i>
b)	<i>You will be notified of the amount of the access fee to be paid.</i>
c)	<i>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.</i>
d)	<i>If you qualify for exemption of the payment of any fee, please state the reason for exemption</i>
Reason	

You will be notified in writing whether your request has been approved or denied and if approved the costs relating to your request, if any. Please indicate your preferred manner of correspondence:

Postal address	Facsimile	Electronic communication <i>(Please specify)</i>

Signed at _____ this _____ day of _____ 20 _____

Signature of Requester / person on whose behalf request is made

FOR OFFICIAL USE

Reference number:	
Request received by: <i>(State Rank, Name And Surname of Information Officer)</i>	
Date received:	
Access fees:	
Deposit (if any):	

Signature of Information Officer

FORM 3
OUTCOME OF REQUEST AND OF 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 address of public/private body (<i>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</i>) 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 B.	
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OR

2. You requested:

Printed copies of the information (<i>including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form</i>)	
Written or printed transcription of virtual images (<i>this includes photographs, slides, video recordings, computer-generated images, sketches, etc</i>)	
Transcription of soundtrack (<i>written or printed document</i>)	
Copy of information on flash drive (<i>including virtual images and soundtracks</i>)	
Copy of information on compact disc drive (<i>including virtual images and soundtracks</i>)	
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 (<i>including transcriptions</i>)	
E-mail of information (<i>including soundtracks if possible</i>)	
Cloud share/file transfer	
Preferred language: (<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>)	

Kindly note that your request has been:

Approved

Denied, for the following reasons:

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4. Fees payable with regards to your request:

Item	Cost per A4-size page or part thereof/item	Number of pages/items	Total
Photocopy			
Printed copy			
For a copy in a computer-readable form on:			
(i) Flash drive	R40.00		
• To be provided by requestor			
(ii) Compact disc	R40.00		
• If provided by requestor			
• If provided to the requestor	R60.00		
For a transcription of visual images per A4-size page	Service to be outsourced. Will depend on the quotation of the service provider		
Copy of visual images			
Transcription of an audio record, per A4-size	R24.00		
Copy of an audio record			
(i) Flash drive	R40.00		
• To be provided by requestor			
(ii) Compact disc	R40.00		
• If provided by requestor			
• If provided to the requestor	R60.00		
Postage, e-mail or any other electronic transfer:	Actual costs		
TOTAL:			

5. Deposit payable (if search exceeds six hours):

Yes

No

Hours of search	Amount of deposit (calculated on one third of total amount per request)

The amount must be paid into the following Bank account:

Name of Bank: _____
 Name of account holder: _____
 Type of account: _____
 Account number: _____
 Branch Code: _____
 Reference Nr: _____
 Submit proof of payment to: _____

Signed at _____ this _____ day of _____ 20 _____

 Information officer