PRESCRIBED FORM TO BE COMPLETED BY A REQUESTER FORM C

REQUEST FOR ACCESS TO RECORDS OF PRIVATE BODY
(Section 53(1) of the Promotion of Access to Information Act, No 2 of 2000)
(Regulation 4)
A. Particulars of the immedia Studio (Pty) Ltd
The Head:
B. Particulars of person requesting access to the record
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.
Reason for request in writing.
Full Name and Surname:
Identity Number:
Postal Address:
Telephone Number:
Fax Number:

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.
Surname:
Identity Number:
D. Particulars of record:
Provide full particulars of the record to which access is requested, including the reference number if it is known to you, to enable the record to be located. 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.
Description of the record or relevant part of the record:
Reference number, if available:
Any further particulars of the record:
E. Fees:

A request for access to a record containing personal information about you will be processed only after a **request fee** has been paid. You will be notified of the amount of the request fee. The **fee payable for access** to a record depends on the form in which the access is required and the reasonable time required to searching for and preparing a record. If you qualify for exemption from the payment of any fee, please state the reason for this. Reason for exemption from payment of the fee: Form of access to the 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: Mark the appropriate box with an " X " NOTES: 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. 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:

Inspector

Copy of record*

3. 4.	If the record contract (Automotive Contract (Automo	in sound	f recorded:	word word	Is or in otion of	soundtraci	which can				
4.	Listen to the soundtrack (Au Cassette) If the record is	in sound	f: Ti	ranscrip	otion of	soundtraci					
 F	soundtrack (Au Cassette) If the record is	held on	pi	•							
<i>F</i>					Transcription of soundtrack*(written or printed document)						
	I	•	computer	or in a	an elec	ctronic or	machine-				
	Printed copy of record	infol	ted copy of rmation ved from th ord*		Copy in computer readable form*(stiffy or compact disc)						
(above	requested a cop p), do you want ti ' to you?					Yes	No				
i. Pa	articulars of rig	ht to be	exercised	or pro	tected	l:					
•	provided space is it to this form Th	•	, ,			,					
ndicate	which right is to	be exercis	sed or prote	cted:							
	why the requested	— d record is	s required fo	or the (exercisi	ng or prote	ction of the				

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 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	_			
SIGNATUR		-	=						