

PROPERTIES

FORM 2

REQUEST FOR ACCESS TO RECORD

[Regulation 7]

NOTE:

TO:

1. Proof of identity must be attached by the requester.

The Information Officer

If requests made on behalf of another person, proof of such authorisation, must be attached to this form.

(Addres	ss)				
E-mail address:					
Fax number:					
Mark with an "X"					
Request is mad	le in my own	name	Requ	est is made on	behalf of another person.
		PERSONA	L INFORMAT	ION	
Full Names					
Identity Number					
Capacity in which request is made (when made on behalf of another person)					
Postal Address					
Street Address					
E-mail Address					
Contact Numbers	Tel. (B):			Facsimile:	
Contact Numbers	Cellular:				
Full names of person on whose behalf request is made (if applicable):					
Identity Number					
Postal Address					

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Rose Eedes Properties (Pty) Ltd | Co Reg No: 2012/089435/07 | Vat Reg No: 4900262082 | Director: AR Eedes.

PPRA REGISTERED | FFC 2023220201

Street Address					
E-mail Address					
Contact Numbers	Tel. (B)		Facsimile		
	Cellular		1		
	PAR	TICULARS OF RECORD RE	QUESTED		
that is known to you, to	enable th	ord to which access is requence record to be located. (If the attach it to this form. All additions	e provided sp	pace is inadequa	
Description of record or relevant part of the record:					
Reference number, if available					
Any further particulars of record					
TYPE OF RECORD (Mark the applicable box with an "X")					
Record is in written or p	rinted form	١			
Record comprises virt computer-generated im-		s (this includes photograph ches, etc)	s, slides, vid	deo recordings,	
Record consists of reco	rded words	s or information which can be	reproduced i	n sound	
Record is held on a con	nputer or in	n an electronic, or machine-re	adable form		

FORM OF ACCESS (Mark the applicable box with an "X")	
Printed copy of record (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 record on flash drive (including virtual images and soundtracks)	
Copy of record on compact disc drive(including virtual images and soundtracks)	
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 (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)	
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)	
E-mail of information (including soundtracks if possible)	
Cloud share/file transfer	
Preferred language (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)	
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. requester must sign all the additional pages.	The
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:				
	FI	ES		
b) You will be notified c) The fee payable the reasonable til	ist be paid before the reque ed of the amount of the ac- for access to a record dep me required to search for exemption of the payment	cess fee to be paid. ends on the form in whic and prepare a record.	·	
Reason				
You will be notified in writ costs relating to your reque			denied and if approved the of correspondence:	
Postal address	Facsimile	Electronic communication (Please specify)		
		I I I I I I I I I I I I I I I I I I I		
		(Fleas	se specify)	
Signed at	this			
Signed at	this			
Signed at	this			
		day of		
	this / person on whose beha	day of		
	/ person on whose beha	day of		
	/ person on whose beha	day of		
Reference number: Request received by: (State Rank, Name	/ person on whose beha FOR OF	day of		
Signature of Requester	/ person on whose beha FOR OF	day of		
Reference number: Request received by: (State Rank, Name Surname of Information Comparison Compari	/ person on whose beha FOR OF	day of		
Reference number: Request received by: (State Rank, Name Surname of Information Control Date received:	/ person on whose beha FOR OF	day of		
Signature of Requester Reference number: Request received by: (State Rank, Name Surname of Information Control Date received: Access fees:	/ person on whose beha FOR OF	day of		
Signature of Requester Reference number: Request received by: (State Rank, Name Surname of Information Contact Date received: Access fees:	/ person on whose beha FOR OF	day of		