FORM A
REQUEST FOR ACCESS TO RECORD OF PUBLIC BODY
(Section 18 (1) of the Promotion of Access to Information Act, 2000
(Act No. 2 of 2000)
[Regulation 2]

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 any): R _____

Deposit fee (if any): R _____

Access fee: R _____

_____

SIGNATURE OF INFORMATION
OFFICER/DEPUTY
INFORMATION OFFICER

A. Particulars of public body

The Information Officer/Deputy Information Officer: Advocate Witness Ndou
Department of Justice and Constitutional Development
Salu Building
316 cnr Thabo Sehume and Francis Baard Streets
Pretoria
0001

Telephone: 27123151111
Fax: 27123151749
Email: webmaster@justice.gov.za

B. Particulars of person requesting access to the record

- *The particulars of the person who requests access to the record 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.*

Full names and surname: South African History Archive (SAHA)
Identity/Passport number: Non-Profit Trust No. 2522/93
Postal address: P.O.Box 31719, Braamfontein, 2017
Fax number: +27866491491
Telephone number: +27117182563
E-Mail Address:foip@saha.org.za

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

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:
Identity number:

D. Particulars of record

- *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 folio and attach it to this form.* ***The requester must sign all the additional folios****.*

- Description of record or relevant part of the record:

Request for all and any records relating to the involvement in Brigadier Jack Cronje and the Hecter and Prinsloo groups in the kidnap, torture and forced disappearance of an unknown man. Please include the following:

I. Records of witness testimony given by Christopher Mosiane's at the Truth and Reconciliation Commission in relation to this request.

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.*
- *You will be notified of the amount required to be paid as the request fee.*
- *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.*
- *If you qualify for exemption of the payment of any fee, please state the reason for exemption.*

Reason for exemption from payment of fees:

F. Form of access to 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.

(c) 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 printed form:

X	Copy of record*		Inspection of record

2. If record consists of visual images:
(this includes photographs, slides, video recordings, computer-generated images,sketches, etc).

	view the images	**X**	copy of the images*		transcription of the images*

3. If record consists of recorded words or information which can be reproduced in sound:

	Listen to the soundtrack (audio cassette)	**X**	transcription of soundtrack* (written or printed document)

4. If record is held on computer or in an electronic or machine ? readable form:

	Printed copy of record*	**X**	Printed copy derived from the record*		copy in computer readable form*(stiffy or compact disc)

	YES	NO
***** If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? **A postal fee is payable.**		**X**

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? ENGLISH

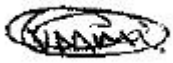
- **G. Notice of decision regarding request for access**

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?

IN WRITING via email to foip@saha.org.za

Signed at this 8th of November 2018.



SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE

Mrs. Vanessa Shingange (Research Officer)

South African History Archive (SAHA)