

**PROMOTION OF ACCESS TO INFORMATION ACT,
ACT 2 OF 2000 ("The Act")**

SECTION 51 MANUAL FOR

AMBER VALLEY BODY CORPORATE

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PREAMBLE

The Promotion of Access to Information Act No. 2 of 2000, ("the Act") came into operation on 23 November 2001. Section 51 of this Act requires that we as a private body compile a manual giving information to the public regarding the procedure to be followed in requesting information from us for the purpose of exercising or protecting rights.

INTRODUCTION

Amber Valley Body Corporate is a retirement village situated in Howick, KwaZulu-Natal.

PARTICULARS IN TERMS OF SECTION 51 OF THE ACT

1. CONTACT DETAILS [Section 5](1) (a)]

Amber Valley Body Corporate has duly authorised the Financial Manager to deal with all matters in connection with requests for information in terms of the Promotion of Access to Information Act 2, 2 of 2000.

Postal address: Private Bag X30
Howick
3290

Street address: Amber Valley
3 Karkloof Road
Howick
3290

Telephone: +27 33 239 5997

Fax: +27 86 550 9909

Website: www.amber-valley.co.za

E-mail: fm@greaterambers.com

2. THE GUIDE AS DESCRIBED IN SECTION 10 [Section 51(1)(b)]

This guide will be available from the Human Rights Commission. Please direct any queries to:

The Human Rights Commission: Postal address:

Private Bag 2700
HOUGHTON
2041

Telephone: +27 11 484 8300

Facsimile: +27 11 484 0582

Website: <http://www.sahrc.org.za>

3. CATEGORIES OF RECORDS OF AMBER VALLEY BODY CORPORATE WHICH ARE AVAILABLE WITHOUT A PERSON HAVING TO REQUEST ACCESS IN TERMS OF SECTION 52(2) OF THE ACT [Section 5](1)(c)J

Amber Valley Body Corporate is not obliged to publish a notice in terms of Section 52(2) of the Act and to date has not elected to do so. Nevertheless Amber Valley Body Corporate does make certain information freely available to the public on its internet web site at www.amber-valley.co.za.

4. RECORDS AVAILABLE IN TERMS OF OTHER LEGISLATION [Section 51(1)(d)]

Information is available in terms of the following legislation to the persons or entities specified in such legislation:

- Basic Conditions of Employment Act 75 of 1997
- Compensation for Occupational Injuries and Diseases Act 130 of 1993
- Consumer Protection Act 68 of 2008
- Electronic Communications and Transactions Act 25 of 2002
- Employment Equity Act 55 of 1998
- Financial Intelligence Centre Act 38 of 2001
- Income Tax Act 58 of 1962
- Labour Relations Act 66 of 1995
- Liquor Act 59 of 2003
- National Environmental Management Act 107 of 1998
- National Water Act 36 of 1998
- Occupational Health and Safety Act 85 of 1993
- Skills Development Levies Act 9 of 1999
- Transfer Duties Act 40 of 1949
- Unemployment Insurance Act 63 of 2001
- Value-Added Tax Act 89 of 1991
- Nursing Act 50 of 1978
- Older Persons Act 13 of 2006
- Sectional Titles Act 95 of 1986

5. HOW TO REQUEST A RECORD, A DESCRIPTION OF THE SUBJECTS ON WHICH WE HOLD RECORDS, AND THE CATEGORIES OF RECORDS HELD ON EACH SUBJECT [Section 51(1)(e)]

5.1 How to request a record

- Section 53 prescribes that the requester must use the prescribed form to make the request for access to a record. This must be made to the head of the private body, or his duly authorised deputy. This request must be made to the address, fax number or electronic mail address of the body concerned.
- The requester must provide sufficient detail on the request form to enable the head of the private body to identify the record and the requester. The requester should also indicate if he or she wishes to be informed in any other manner and state the necessary particulars to be informed.

- The requester must identify the right that he or she is seeking to exercise or protect and provide an explanation of why the requested record is required for the exercise or protection of that right.
- If a request is made on behalf of a person, the requester must then submit proof of the capacity in which the requester is making the request to the satisfaction of the head of the private body.
- The head of the private body must notify the requester (other than a personal requester) by notice, requiring the requester to pay the prescribed fee (if any) before further processing the request.
- The fee for private bodies is R50. The requester may lodge an internal appeal or an application to the court against the tender or payment of the request fee.
- If the request is granted then a further access fee must be paid for the reproduction and the search and preparation, and for any time that has exceeded the prescribed hours to search and prepare the record for disclosure.

The head of the private body will then make a decision on the request and notify the requester in the required form.

5.2 Categories of records held by Amber Valley Body Corporate

5.2.1 Webpage

The web page, www.amber-valley.co.za, is accessible to anyone who has access to the internet.

5.2.2 Internal records

The following are records pertaining to Amber Valley Body Corporate's own affairs:

Accounting records

- Books of account including journals and ledgers
- Orders, invoices, statements, receipts, vouchers and bills of exchange

Statutory employee records

- Employees' names and occupations
- Time worked by each employee
- Remuneration paid to each employee
- Date of birth of each employee
- Attendance register
- Salary and wages register
- Determinations made in terms of the Wage Act
- Staff records (after date of employment ceases)

Other employee records

- Employee contracts
- Study assistance schemes
- Maternity leave policy
- Group provident fund
- Code of conduct

Environmental health and safety records

- Water quality monitoring programme records
- Waste water assessment and monitoring records
- Safety management systems, data and audits
- Environmental management programs and systems
- Environmental authorisations

Fixed property records

- Title deeds
- Leases
- Building plans

Movable property records

- Asset register
- Finance and lease agreements

Agreements and contracts

- Material agreements concerning provision of services or materials
- Acquisition or disposal documentation
- Agreements with contractors and suppliers
- Agreements with customers
- Purchase or lease agreements

Taxation

- Copies of all income tax returns and other tax returns and documents

Legal

- Complaints, pleadings, briefs and other documents pertaining to any actual,
- pending or threatened litigation, arbitration or investigation
- Material licenses, permits and authorisations

Insurance records

- Insurance policies
- Claim records
- Details of insurance coverage, limits and insurers

Information technology

- Hardware
- Operating systems
- Telephone exchange equipment
- Telephone lines, leased lines and data lines
- LAN installations
- Software packages

- Disaster recovery
- Agreements
- Licenses

5.2.3 Other records

We hold further records, including:-

- Information relating to Amber Valley Body Corporate's own commercial activities
- Procurement and administration for Amber Valley Body Corporate; and
- Research information belonging to Amber Valley Body Corporate or carried out on behalf of a third party.

6. OTHER INFORMATION AS MAY BE PRESCRIBED [Section 5] (1)(f)]

No such information has been prescribed.

7. AVAILABILITY OF THE MANUAL [Section 51 (3)]

This manual is available from the South African Human Rights Commission (see details above), from Amber Valley Body Corporate, and in electronic format at www.amber-valley.co.za.

Signed:

Chairman: Amber Valley Body Corporate

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):	
	Cellular:	
Facsimile:		
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 <i>(Mark the applicable box with an "X")</i>	
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 <i>(Mark the applicable box with an "X")</i>	
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	
<i>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.</i>	
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:	

FEES	
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 (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 B.	
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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)	
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)	

Kindly note that your request has been:

Approved

Denied, for the following reasons:

--

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

INTERNAL APPEAL FORM

FORM 4

[Regulation 9]

Reference Number:

PARTICULARS OF PUBLIC BODY				
Name of Public Body				
Name and Surname of Information Officer:				
PARTICULARS OF COMPLAINANT WHO LODGES THE INTERNAL APPEAL				
Full Names				
Identity Number				
Postal Address				
Contact Numbers	Tel. (B)		Facsimile	
	Cellular			
E-Mail Address				
Is the internal appeal lodged on behalf of another person?		Yes	<input type="checkbox"/>	No <input type="checkbox"/>
If answer is "yes", capacity in which an internal appeal on behalf of another person is lodged: <i>(Proof of the capacity in which appeal is lodged, if applicable, must be attached.)</i>				
PARTICULARS OF PERSON ON WHOSE BEHALF THE INTERNAL APPEAL IS LODGED <i>(If lodged by a third party)</i>				
Full Names				
Identity Number				
Postal Address				
Contact Numbers	Tel. (B)		Facsimile	
	Cellular			
E-Mail Address				

DECISION AGAINST WHICH THE INTERNAL APPEAL IS LODGED

(mark the appropriate box with an "X")

Refusal of request for access	
Decision regarding fees prescribed in terms of section 22 of the Act	
Decision regarding the extension of the period within which the request must be dealt with in terms of section 26(1) of the Act	
Decision in terms of section 29(3) of the Act to refuse access in the form requested by the requester	
Decision to grant request for access	

GROUNDS FOR APPEAL

(If the provided space is inadequate, please continue on a separate page and attach it to this form. all the additional pages must be signed)

State the grounds on which the internal appeal is based:	
State any other information that may be relevant in considering the appeal:	

You will be notified in writing of the decision on your internal appeal. Please indicate your preferred manner of notification:

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

Signed at _____ this _____ day of _____ 20 _____

Signature of Appellant/Third party

FOR OFFICIAL USE
OFFICIAL RECORD OF INTERNAL APPEAL

Appeal received by: <i>(state rank, name and surname of Information Officer)</i>				
Date received:				
Appeal accompanied by the reasons for the information officer's decision and, where applicable, the particulars of any third party to whom or which the record relates, submitted by the information officer:			Yes <input type="checkbox"/>	
			No <input type="checkbox"/>	
OUTCOME OF APPEAL				
Refusal of request for access. Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Fees (Sec 22). Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Extension (Sec 26(1)). Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Access (Sec 29(3)). Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		
Request for access granted. Confirmed?	Yes	<input type="checkbox"/>	New decision <i>(if not confirmed)</i>	
	No	<input type="checkbox"/>		

Signed at _____ this _____ day of _____ 20 _____

Relevant Authority