

Beautology Beauty salon CC

Registration No. 2007/083219/23

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

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

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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 *Promotion Of Access to Information Act 2 of 2000 (as amended)* from **Beautology Beauty salon CC**

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 **the accounting officer Rudolf Berkelmann**

Section 25(2) states that:

(2) 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 requester 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 15 granted, and the procedure (including the period) for lodging the internal appeal or application, as the case may be.

(3) 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 requester 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

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

4. Background / overview

Beautology Beauty salon CC is a SME providing beauty and skincare treatments both mobile and at home

5. Organisation Details

- a. Name:** Beautology Beauty salon CC
b. Address: c/o the information officer
1st Floor Stats Building,
Fore Street, Alberton, 1449
c. Postal address: P.O. Box 136505, Alberton North, 1456
d. Contact details: c/o Information Officer - Rudolf Berkelmann
Tel: 011 907 0302 Fax 086 552 9675
Email: accounts@rbbusiness.co.za
e. No Website

6. Details of the information officer

- a. Name:** Rudolf Berkelmann
b. Address: 1st Floor Stats Building, Fore Street, Alberton
c. Postal address: P.O. Box 136505, Alberton North, 1456
d. Contact details: Rudolf Berkelmann
e. Website www.rbbusiness.co.za

7. Section 51(1) (c)

No records in terms of section 51(1)(c) are available

8. Section 51(1) (d)

Records, where applicable, are available in accordance with the following legislation

- Basic Conditions of Employment Act 75 of 1997
- Closed Corporation Act 69 of 1984
- Close Corporations amendment Act 25 of 2005
- Consumer Protection Act 68 of 2008
- Employment Equity Act 55 of 1998
- Financial Intelligence Centre Act 38 of 2001
- Income Tax Act 58 of 1962
- Intellectual Property Laws Amendments Act 38 of 1997
- Labour Relations Act 66 of 1995
- Occupational Health and Safety Act 85 of 1993
- Skills Development Act 97 of 1998
- Skills Development Levies Act 9 of 1999
- Unemployment Insurance Act 63 of 2001
- Unemployment Insurance Contributions Act 4 of 2002

9. Section 51(1) (e)

The organisation holds records in the following subjects / categories:-

- Accounting records
- Personnel Records
- Sales and Marketing
- Statutory Company records
- Client Databases
- Internal Phone lists
- Minutes of Meetings
- Administrative information

10. Requesting Procedure

A person who wants access to the records must complete the necessary request form, as set out in Annexure 1, and the completed form must be sent to the address or fax number 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 requester is requesting the information

11 Availability of the Manual

11.1 This manual is available for inspection by the general public upon request during office hours and there is no charge for viewing the manual at our.

11.2 Copies of the manual may be made available subject to the prescribed fees

11.3 Copies may also be requested from the South African Human Rights Commission at the address indicated below.

12. Fees

- 12.1. A requester who seeks access to a record containing personal information about that requester is not required to pay the request fees. Any other requester who is not a personal requester must pay the required fee:
- 12.2. A fee will be required by the head (*contact person*) before further processing of the request in terms of S54 of the Act
- 12.3. A requester fee of R50 should be paid, this amount will be refunded should the request for access be refused
- 12.4. A portion of the access fee (not more than one third) may be required before the request is considered
- 12.5. 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
- 12.6. The head may withhold a record until the requester has paid the applicable fees

13. 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

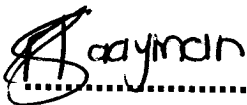
2041

Phone: 011 484 8300

Fax: 011 484 0582

Email: PAIA@sarhc.org.za

Website: www.sahrc.org.za



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**Signed by A Saayman
Member**

FORM C

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY

(Section 53(1) of the Promotion of Access to Information Act, 2000

(Act No. 2 of 2000)

[Regulation 10]

A. Particulars of private body

The Head: _____

B. Particulars of person requesting access to the record

- | | |
|-----|---|
| (a) | The particulars of the person who requests access to the record must be given below. |
| (b) | The address and/or fax number in the Republic to which the information is to be sent must be given. |
| (c) | Proof of the capacity in which the request is made, if applicable, must be attached. |

Full names and surname: _____

Identity number: _____

Postal address: _____

Fax number: _____

Telephone number: _____

E-mail address: _____

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

- (a) 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.
- (b) 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.

- 1 Description of record or relevant part of the record: _____

- 2 Reference number, if available: _____
- 3 Any further particulars of record: _____

E. Fees

- (a) 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.
- (b) You will be notified of the amount required to be paid as the request fee.
- (c) 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.
- (d) 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: | |
| (a) Compliance with your request in the specified form may depend on the form in which the record is available. | |
| (b) 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 for 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: | | | | | |
| <input type="checkbox"/> | copy of record* | <input type="checkbox"/> | inspection of record | | |
| 2. If record consists of visual images this includes photographs, slides, video recordings, computer-generated images, sketches, etc) | | | | | |
| <input type="checkbox"/> | view the images | <input type="checkbox"/> | copy of the images" | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | transcription of the images* | | |
| 3. If record consists of recorded words or information which can be reproduced in sound: | | | | | |
| <input type="checkbox"/> | listen to the soundtrack audio cassette | <input type="checkbox"/> | transcription of soundtrack* written or printed document | | |
| 4. If record is held on computer or in an electronic or machine-readable form: | | | | | |
| <input type="checkbox"/> | printed copy of record* | <input type="checkbox"/> | printed copy of information derived from the record" | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | copy in computer readable form* (stiffy or compact disc) | | |
| *If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? Postage is payable. | | | <table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table> | YES | NO |
| YES | NO | | | | |

G Particulars of right to be exercised or protected

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.

1. Indicate which right is to be exercised or protected: _____

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

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 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 _____ on this _____ day of _____

SIGNATURE OF REQUESTER / PERSON ON
WHOSE BEHALF REQUEST IS MADE