

**SECTION 51 PROMOTION TO THE ACCESS OF INFORMATION
MANUAL FOR IRS FORENSIC INVESTIGATIONS
(2011/122311/07)**

**AS AMENDED BY THE
PROTECTION OF PERSONAL INFORMATION ACT, 4 OF 2013**

INFORMATION REQUIRED UNDER SECTION 51(1)(a) OF THE ACT:

PO BOX 46508, ORANGE GROVE, 2119

PHYSICAL ADDRESS OF HEAD OF IRS FORENSIC INVESTIGATIONS:

11 THIRD AVENUE, HOUGHTON ESTATE, JOHANNESBURG, 2198

TEL. NO OF HEAD OF IRS FORENSIC INVESTIGATIONS:

0861 911 477

FAX. NO OF HEAD OF IRS FORENSIC INVESTIGATIONS:

086 730 9182

EMAIL ADDRESS OF HEAD OF IRS FORENSIC INVESTIGATIONS:

glenda@irsa.co.za

DESCRIPTION OF GUIDE REFERRED TO IN SECTION 10: SECTION 51(1)(b)

A guide has been compiled in terms of Section 10 of PAIA by **IRS Forensic Investigations**. It contains information required by a person wishing to exercise any right, contemplated by PAIA.

This Guide is available for inspection, inter alia, at the office of the offices of **IRS Forensic Investigations** at the physical address above and at the SAHRC.

THE LATEST NOTICE IN TERM OF SECTION 52(2) (IF ANY):

At this stage no notice(s) has. have been published on the categories of records that are automatically available without a person having to request access in terms of PAIA.

ACTS AND OTHER LEGISLATION HELD AT PHYSICAL ADDRESS BY IRS FORENSIC INVESTIGATIONS:

- Basic Conditions of Employment 74 of 19970
- Companies Act 71 of 2008
- Consumer Protection Act 68 of 2008
- Debtor Collectors Act of 114 of 1998
- Financial Advisory and Intermediary Services Act 37 of 2002
- Financial Intelligence Centre Act 38 of 200
- Financial Services Board Act 970 of 1990
- Harmful Business Practices Act 23 of 1999
- National Harmful Credit Act 34 of 2005
- Promotion of Access to Information Act 2 of 2000
- Criminal Procedure Act 51 of 1977
- Private Security Industry Regulations Act 56 of 2001
- Protections of Personal Information Act 4 of 2013
- Prevention of Organised Crime Act 121 of 1998
- Public Audit Act of 2004

SUBJECTS AND CATEGORIES OF RECORDS HELD AT PHYSICAL ADDRESS BY IRS FORENSIC INVESTIGATIONS:

- Correspondence
- Founding Documents
- Licenses (categories)
- Minutes of Management Meetings
- Minutes of Staff Meetings
- Shareholder Register
- Statutory Returns
- Conditions of Service
- Employee Records
- Employment Contracts
- Employment Equity Records
- General Correspondence
- Industrial and Labour Relations Records
- Information relating to Health and Safety Regulations
- Pension and Provident Fund Records
- Performance Appraisals
- Personnel Guidelines, Policies and Procedures
- Remuneration Records and Policies
- Salary Surveys
- Skills Requirements
- Staff Requirement Policies
- Statutory Records
- Contracts
- Information relating to Employee Sales Performance

- Information relating to Work-In-Progress
- Supplier Registry
- Annual Financial Statements
- Asset Register
- Banking Records
- Financial Transactions
- Insurance Information
- Tax Records (Company and Employees)
- Training Records
- Brochures on Company Information
- Client and Customer Registry

DETAIL ON HOW TO MAKE A REQUEST FOR ACCESS – SECTION 51(e)

- The requester must complete Form B and submit this form together with a request fee, to the head of the private body
- The form must be submitted to the head of the private body at his/her address, fax, number of email address
- The form must:
 - provide sufficient particulars to enable the head of the private body to identify the record/s requested and to identify the requester.
 - indicate which form of access is required
 - specify a postal address or fax number of the request to the republic
 - identify the right that the requester is seeking to exercise or protect
 - provide an explanation of why the requested record is required for the exercise or protection of that right
 - in addition to a written reply, the requester wishes to be informed of the decision on the request in any other manner, to state that the manner and the necessary particulars to be informed in the other manner, if the request is made on behalf of another person, to submit proof of capacity in which the requester is making the request, to the reasonable satisfaction of the head of the private body.

INFORMATION RELATED TO POPIA:

INTRODUCTION:

The POPIA requires us to provide you with certain information relating to how personal information that we process is, amongst others used, disclosed, and destroyed. We have set out the required information below.

INFORMATION ON HOW YOU CAN REQUEST YOUR PERSONAL INFORMATION POPIA:

Requests for personal information under POPIA must be made in accordance with the provisions of PAIA.

If we provide you with your personal information, you have the right to request the correction, deletion, or destruction of your personal information, in the prescribed form. You may also object to the processing of your personal information in the prescribed form. We have, for your convenience, attached the form to this Manual. It is attached as Form C.

We will give you a written estimate of the fee for providing you with your personal information, before providing you with the services. We may also require you to provide us with a deposit for all or part of the fee prior to giving you the requested personal information.

PURPOSE OF PROCESSING:

POPIA provides that personal information may only be processed lawfully and in a reasonable manner that does not infringe your (the data subject’s) privacy.

The type of personal information that we process will depend on the purpose for which it is collected. We will disclose to you why the personal information is being collected and will process the personal information for that purpose only.

Should you wish to object to IRS, or IRS’s third-party service providers, processing your personal information, please complete Form D.

PERSONAL INFORMATION THAT IS PROCESSED:

CATEGORY OF DATA SUBJECT:	CATEGORY OF PERSONAL INFORMATION:
Natural Persons	Names; contact details; physical and postal addresses; date of birth; ID number; tax related information; nationality; gender; banking details; data received from the Deeds office; and confidential correspondence
Juristic Persons / Entities	Names of contact persons; name of Legal Entity, physical and postal address and contact details, financial information; Registration number; Founding documents; Tax related information; authorised signatories, beneficiaries, ultimate beneficial owners
Foreign Persons / Entities	Names; contact details; physical and postal, financial information addresses; Registration number; Founding documents; Tax related information; nationality; gender; confidential correspondence, Registration Number; Founding documents; Tax related information; authorised signatories, beneficiaries, ultimate beneficial owners
Contracted Service Providers	Names of contact persons; name of Legal Entity, physical and postal address and contact details, financial information; Registration number; Founding documents; Tax related information; authorised signatories, beneficiaries, ultimate beneficial owners

Intermediary / Advisor	Names of contact persons; name of Legal Entity, physical and postal address and contact details, financial information; Registration number; Founding documents; Tax related information; authorised signatories, beneficiaries, ultimate beneficial owners
Employees/ Directors/ Potential personnel/ Shareholders/ Volunteers/ Employees' family members/ Temporary Staff	Gender, Pregnancy, Marital Status; Race, Age, Language, Education Information; Financial Information; Employment History; ID number; Next of kin; Children's name, gender, age, school grades; Physical and Postal address; Contact details; Opinions; Criminal behaviour and/ or criminal records; well-being; Trade Union membership; external commercial interests; Medical Information
Website end-users / Application end-users	Names, Electronic identification data; IP address; log-in data, cookies, Electronic localisation data; cell phone details, GPS Data

CATEGORIES OF RECIPIENTS FOR PURPOSES OF PROCESSING PERSONAL INFORMATION:

We may supply personal information to these potential recipients:

- Management;
- Employees;
- Temporary Staff; and
- Sub-contracted Operators

We may disclose personal information we collected to any of our third-party service providers, with whom we engage in business or whose services or products we elect to use, including cloud services hosted in international jurisdictions.

We endeavour to enter into written agreements to ensure that other parties comply with our confidentiality and privacy requirements. Personal information, may also be disclosed where we have a legal duty or a legal right to do so.

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GENERAL DESCRIPTION OF INFORMATION SECURITY MEASURES:

IRS employs appropriate, reasonable technical and organisational measures to prevent loss of damage to or unauthorised destruction of personal information and unlawful access to or processing of personal information. These measures include:

- Firewalls;

- Virus protection software and update protocols;
- Logical and physical access control; and
- Secure setup of hardware and software making up our information technology infrastructure

FORM B

**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 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:	
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.

Description of record or relevant part of the record:	
Reference number, if available:	
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, state your disability and indicate in which form the record is required

Disability:	Form in which record is required:
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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:			
	listen to the soundtrack audio cassette		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*	printed copy of information derived from the record"	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.			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..... This..... day of..... 202_

SIGNATURE OF REQUESTER / PERSON ON WHOSE BEHALF REQUEST IS MADE

FORM C

REQUEST FOR CORRECTION OR DELETION OF PERSONAL INFORMATION OR DESTROYING OR DELETION OF RECORD OF PERSONAL INFORMATION IN TERMS OF SECTION 24(1) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018 [Regulation 3]

Note:

- 1 *Affidavits or other documentary evidence as applicable in support of the request may be attached.*
- 2 *If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.*
- 3 *Complete as is applicable.*

Mark the appropriate box with an "x".

Request for:

Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.

Destroying or deletion of a record of personal information about the data subject which is in possession or under the control of the responsible party and who is no longer authorised to retain the record of information.

A	DETAILS OF THE DATA SUBJECT
Name(s) and surname / registered name of data subject:	
Unique identifier/ Identity Number:	
Residential, postal or business address	
	Code ()
Contact number(s):	
Fax number/E-mail address:	
B	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname / registered name of responsible party:	
Residential, postal or business address:	

	Code ()
Contact number(s):	
Fax number/ E-mail address:	
C	INFORMATION TO BE CORRECTED/DELETED/ DESTRUCTED/ DESTROYED
D	REASONS FOR *CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(a) WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY; and or REASONS OR *DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(b) WHICH THE RESPONSIBLE PARTY IS NO LONGER AUTHORISED TO RETAIN. <i>(Please provide detailed reasons for the request)</i>

Signed at this day of20....

.....
Signature of data subject/ designated person

FORM D

OBJECTION TO THE PROCESSING OF PERSONAL INFORMATION IN TERMS OF SECTION 11(3) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018

[Regulation 2]

Note:

- 1 *Affidavits or other documentary evidence as applicable in support of the objection may be attached.*
- 2 *If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.*
- 3 *Complete as is applicable.*

A	DETAILS OF THE DATA SUBJECT
Name(s) and surname/ registered name of data subject:	
Unique identifier/ Identity Number:	
Residential, postal or business address	
	Code ()
Contact number(s):	
Fax number/ E-mail	
B	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname/ Registered name of responsible party:	
Residential, postal or business address:	
	Code ()
Contact number(s):	
Fax number/ E-mail	

