INTERNAL APPEAL FORM

FORM 4

[Regulation 9]

		Reference N	lumber:	******			••••••
	P	RTICULARS OF PUBLI	C BODY				
Name of Public Boo	ly						
Name and Surname Officer:	of Information						
PARTIC	CULARS OF CO	MPLAINANT WHO LODG	GES THE INT	ERNA	L APPEAI		
Full Names			*				
Identity Number							
Postal Address							
Contact Numbers	Tel. (B)		Facsimile	3			
	Cellular						
E-Mail Address							
Is the internal appear	al lodged on beh	If of another person?	Yes		No		
	erson is lodged:	an internal appeal on Proof of the capacity in must be attached.)					
PARTICULAR	RS OF PERSON	ON WHOSE BEHALF The control of the c		_ APP	EAL IS LO	DGE)
Full Names					<u></u>		
Identity Number							
Postal Address							
Contact Numbers	Tel. (B)	·	Facsimile				
	Cellular		1				
E-Mail Address							

DEGIGI		HE INTERNAL APPEAL IS LODGED priate box with an "X")
Refusal of request for ac	cess	
Decision regarding fees	prescribed in terms of se	ction 22 of the Act
Decision regarding the eterms of section 26(1) of		within which the request must be dealt with in
Decision in terms of se requester	ction 29(3) of the Act to	o refuse access in the form requested by the
Decision to grant reques	t for access	
(If the provided space i	s inadequate, please cor	S FOR APPEAL ntinue on a separate page and attach it to this form. a ages 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 wanner of notification:	vriting of the decision o	n your internal appeal. Please indicate your prefe
Postal address	Facsimile	Electronic communication (Please specify)

Signature of Appellant/Third party

FOR OFFICIAL USE OFFICIAL RECORD OF INTERNAL APPEAL

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: Confirmed	Appeal received by: (state rank, name an Officer)	d surname of	Information				
applicable, the particulars of any third party to whom or which the record relates, submitted by the information officer: OUTCOME OF APPEAL	Date received:						
No New decision (if not confirmed) Yes New decision (if not confirmed)	applicable, the particul	lars of any thi			Yes		
Yes	Submitted by the information	ation onicer:			No	Ш	
Refusal of request for access. Confirmed? No			OUTCOME OF AF	PEAL			
No		Yes					
Fees (Sec 22). Confirmed? No No No No New decision (if not confirmed) New decision (if not confirmed) No No No No No No No No No N		No 🗌					
Extension (Sec 26(1)). Confirmed? No		Yes					
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Access (Sec 29(3)). Confirmed? Yes No Sec 29(3)). Confirmed? No Sec 29(3)). No Sec 29(3) No Sec	Extension (Sec 26(1)).	Yes					
Access (Sec 29(3)). Confirmed? No Yes No No No No No No No No No N	Confirmed?	No					
Request for access granted. Confirmed? No Confirmed Yes New decision (if not confirmed) No Confirmed	Access (Sec 29(3)). Confirmed?	Yes					
granted. Confirmed? No (if not confirmed)		No 🗌					
granted. Confirmed? No confirmed)		Yes					
Signed at this day of 20		No					
Signed at this day of 20							
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Relevant Authority	Relevant Authority	· · · · · · · · · · · · · · · · · · ·					