## **INTERNAL APPEAL FORM**

## FORM 4

[Regulation 9]

|                              |                | Reference N  | lumber:     |        |           |     |
|------------------------------|----------------|--|-------------|--------|-----------|-----|
|                              | P              | ARTICULARS OF PUBLI  | C BODY      |        |           |     |
| Name of Public Body          |                |  |             |        |           |     |
| Name and Surname of Officer: | of Information |  |             |        |           |     |
| PARTICU                      | JLARS OF CO    | MPLAINANT WHO LODG   | GES THE INT | ΓERNAL | APPEAL    |     |
| Full Names                   |                |  |             |        |           |     |
| Identity Number              |                |  |             |        |           |     |
| Postal Address               |                |  |             |        |           |     |
| Contact Numbers              | Tel. (B)       |  | Facsimile   |        |           |     |
|                              | Cellular       |  |             |        |           |     |
| E-Mail Address               |                |  |             |        |           |     |
| Is the internal appeal       | lodged on beh  | nalf of another person?  | Yes         |        | No        |     |
|                              | son is lodged: | ch an internal appeal on (Proof of the capacity in e, must be attached.) |             |        |           |     |
| PARTICULARS                  | OF PERSON      | I ON WHOSE BEHALF TH<br>(If lodged by a third p                          |             | L APPE | AL IS LOD | GED |
| 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   | s prescribed in terms of secti | on 22 of the Act   |                      |  |  |  |
| Decision regarding the terms of section 26(1)   |                                | thin which the request must be de  | alt with in          |  |  |  |
| Decision in terms of s<br>requester   | ection 29(3) of the Act to     | refuse access in the form request  | ed by the            |  |  |  |
| Decision to grant reque   | st for access                  |  |                      |  |  |  |
| (If the provided space  | is inadequate, please contir   | FOR APPEAL<br>nue on a separate page and attach i<br>ges must be signed) | it to this form. all |  |  |  |
| 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 manner of notification:   | writing of the decision on     | your internal appeal. Please indic                                       | ate your preferre    |  |  |  |
| Postal address  | Facsimile                      | Electronic communica (Please specify)                                    | ation                |  |  |  |
|   |                                |  |                      |  |  |  |
| Signed at   | this                           | _ day of20   |                      |  |  |  |
|   |                                |  |                      |  |  |  |

Signature of Appellant/Third party

## FOR OFFICIAL USE OFFICIAL RECORD OF INTERNAL APPEAL

| Officer)  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, |     |      |                                       |       | Yes |    |              |  |
| submitted by the information officer:   |     |      |                                       |       |     | No |              |  |
|   |     | C    | OUTCOME OF                            | APP   | EAL |    |              |  |
| Refusal of request for access. Confirmed?   | Yes |      | New decision<br>(if not<br>confirmed) |       |     |    |              |  |
|   | No  |      |                                       |       |     |    |              |  |
| Fees (Sec 22).  | Yes |      | New decision<br>(if not<br>confirmed) |       |     |    |              |  |
| Confirmed?  | No  |      |                                       |       |     |    |              |  |
| Extension (Sec 26(1)).<br>Confirmed?  | Yes |      | New decision                          |       |     |    |              |  |
|   | No  |      | (if not<br>confirmed)                 |       |     |    |              |  |
| Access (Sec 29(3)).<br>Confirmed?   | Yes |      | New decision                          |       |     |    |              |  |
|   | No  |      | (if not<br>confirmed)                 |       |     |    |              |  |
| Request for access granted. Confirmed?  | Yes |      | New decision<br>(if not<br>confirmed) |       |     |    |              |  |
|   | No  |      |                                       |       |     |    |              |  |
|   |     |      |                                       |       |     |    |              |  |
| Signed at   |     | this |                                       | day d | of  | 20 | <del> </del> |  |
|   |     |      |                                       |       |     |    |              |  |
|   |     |      |                                       |       |     |    |              |  |