# 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 thir**d-party service providers, processing your personal information, please complete Form D.

#### PERSONAL INFORMATION THAT IS PROCESSED:

<b>CATEGORY OF DATA SUBJECT:</b>	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 out confidentiality and privacy requirements. Personal information, may also be disclosed where we have a legal duty or a legal right to do so.

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.

#### **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 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				
(Addres	ss)				
E-mail address:					
Fax number:					
Mark with an "X"					
Request is mad	le in my ow	n name	Requ	est is made on	behalf of another person
		PERSONAL	INFORMAT	ION	
Full Names					
Identity Number					
Capacity in which request is made					
(when made on behalf					
of another person) Postal Address					
Street Address					
E-mail Address					
Octobril Novil con	Tel. (B):			Facsimile:	
Contact Numbers	Cellular:				
Full names of person on whose behalf					
request is made (if applicable):					
Identity Number					
Postal Address					

Street Address					
E-mail Address					
Contact Numbers	Tel. (B)		Facsimile		
	Cellular		1		
	PAR	TICULARS OF RECORD REC	QUESTED		
that is known to you, to	enable th	ord to which access is requence record to be located. (If the attach it to this form. All addition	e provided sp	pace is inadequa	
Description of record or relevant part of the record:					
Reference number, if available					
Any further particulars of record					
	(	TYPE OF RECORD (Mark the applicable box with	an " <b>X</b> ")		
Record is in written or p	rinted form	)			
Record comprises virt computer-generated im		s (this includes photographs ches, etc)	s, slides, vid	deo recordings,	
Record consists of reco	rded words	s or information which can be	reproduced i	n sound	
Record is held on a con	nputer or in	an electronic, or machine-rea	adable form		

FORM OF ACCESS	
(Mark the applicable box with an " <b>X</b> ")	
Printed copy of record (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 record on flash drive (including virtual images and soundtracks)	
Copy of record on compact disc drive(including virtual images and soundtracks)	
Copy of record saved on cloud storage server	
MANNER OF ACCESS  (Mark the applicable box with an "X")	
Personal inspection of record 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)	
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)	
PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED	
If the provided space is inadequate, please continue on a separate page and attach it to this Formula requester must sign all the additional pages.	orm. The
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:			
alorementioned right.			
	FE	ES	
	st be paid before the requ		
	ed of the amount of the acc	cess fee to be paid. ends on the form in which access is required	and
	me required to search for a		anu
d) If you qualify for		of any fee, please state the reason for exemp	otion
Reason			
		has been approved or denied and if approyour preferred manner of correspondence:	ved the
oodo rolating to your roque	ot, il dily. I lodge illalodio	your professor mariner or correspondences.	
Postal address	Facsimile	Electronic communication (Please specify)	
Postal address	Facsimile		
		(Please specify)	
		(Please specify)	-
		(Please specify)	-
Signed at	this	(Please specify) day of20	-
Signed at		(Please specify) day of20	-
Signed at	this / person on whose beha	(Please specify) day of20	-
Signed at	this / person on whose beha	(Please specify) day of20	-
Signed at Signature of Requester Reference number: Request received by:	/ person on whose beha	(Please specify) day of20	-
Signed at	/ person on whose beha FOR OF	(Please specify) day of20	-
Signed at Signature of Requester Reference number: Request received by:	/ person on whose beha FOR OF	(Please specify) day of20	-
Signed at	/ person on whose beha FOR OF	(Please specify) day of20	-
Signed at	/ person on whose beha FOR OF	(Please specify) day of20	-
Signed at	/ person on whose beha FOR OF	(Please specify) day of20	-
Signed at	/ person on whose beha FOR OF	(Please specify) day of20	-
Signed at	/ person on whose beha FOR OF	(Please specify) day of20	-

Signature of Information Officer

#### 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]

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d.

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.
Mar	k the appropriate box with an "x".
Req	uest 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.

Α		DETAILS	OF TH	E 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:							
В		DETA	ILS OF RE	SPONSIB	LE PARTY		
Name(s) and surname /							
registered name of							
responsible party:							
Residential, postal or							
business address:							
	I						

	Code ( )
Contact number(s):	
Fax number/ E-mail address:	
С	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. (Please provide detailed reasons for the request)
Signed at	thisday of20
 Signature of data subjec	t/ 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.
- 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.

DETAILS OF THE DATA SUBJECT	
Code (	)
DETAILS OF RESPONSIBLE PARTY	
Code (	)
Code (	)

С	REASONS FOR OBJECTION IN TERMS OF SECTION 11(1)(d) to (f) (Please provide detailed reasons for the objection)
Signed at	this day of20
<b>G</b>	,
Signature of data subject,	/ designated person