SA HOME LOANS

REQUEST FOR ACCESS TO INFORMATION FORM/REQUEST FOR ACCESS TO RECORD

Note: 1. Proof of identity must be attached by the requester.

2. If requests are made on behalf of another person, proof of such authorisation, must be attached to this form.

To: The Information Officer
2 Milkwood Crescent, Milkwood Park
La Lucia Ridge
4051

Email Address: InformationOfficer@sahomeloans.com

Mark the appropriate box with an "X"

☐ **Request is made in my own name**

☐ **Request is made on behalf of another person**

PERSONAL INFORMATION			
Surname		First names	
Identity number		E-mail address	
Telephone no.		Facsimile no.	
Postal address			
Street address			
Capacity in which request is made *(when made on behalf of another person)*			
PARTICULARS OF PERSON ON WHOSE BEHALF REQUEST IS MADE (IF APPLICABLE)			
Surname		First names	
Identity number		E-mail address	
Telephone no		Facsimile no.	
Postal address			
Street Address			

PARTICULARS OF RECORDS REQUESTED

Provide full particulars of the record to which access is requested, including the reference number/loan account number/ policy number etc if that is known to you, to enable the record to be located. (If the space provided is inadequate, please continue on a separate page and attach it to this form. All additional pages must be signed.)

Reference Number (Loan Account Number/Policy Number):	
DESCRIPTION OF RECORD OR RELEVANT PART OF THE RECORD	

ANY FURTHER PARTICULARS OF RECORD	
TYPE OF RECORD *(Mark the applicable box with an X)*	
Record is in written or printed form	
Record compromises of virtual images *(this includes photographs, slides, video, recordings, computer generated images, sketches etc)*	
Record consists of recorded words or information which can be reproduced in sound	
Record is held on a computer or in an electronic or machine-readable form	
FORM OF ACCESS TO RECORD *(Mark the applicable box with an X)*	
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)*	
Email 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)*	

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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 Form. The requester must sign all the additional pages.*	
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:	

FEES

a) A request fee must be paid before the request will be considered.
b) You will be notified of the amount of the access to be paid, if applicable.
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 and prepare a record.
d) If you qualify for exemption of the payment of any fee, please state the reason for exemption.

Reason	

NOTICE OF DECISION REGARDING REQUEST FOR ACCESS

SA Home Loans will notify you in writing whether your request has been approved or denied and if approved the costs relating to your request, if any. Please indicate your preferred manner of correspondence:

Postal Address	**Facsimile**	**Electronic communication *(Please specify)***

PRIVACY NOTICE

I/we hereby acknowledge and undertake to comply with all provisions of the Protection of Personal Information Act No. 4 of 2013 when processing any personal information which may be contained in the disclosure of the information made available to me. I/we understand that it is my/our responsibility to maintain any personal information provided as a result of this request in the strictest confidence and only to use it for the purposes for which it was requested.

SIGNATURE

Signed at:	Date:
Signature of the Requester:	


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