



**REQUEST FOR ACCESS TO RECORD OF VOLKSWAGEN OF SOUTH AFRICA**

**(Registration No. 1946/023458/07**

**[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/Designated Person: \_\_\_\_\_  
\_\_\_\_\_

**B. Particulars of person requesting access to the record**

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|---|
| <p>(a) <i>The particulars of the person who requests access to the record must be given below.</i></p> <p>(b) <i>The address and/or fax number in the Republic to which the information is to be sent must be given.</i></p> <p>(c) <i>Proof of the capacity in which the request is made, if applicable, must be attached.</i></p> |
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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**

<p><i>This section must be completed ONLY if a request for information is made on behalf of another person.</i></p>
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Full names and surname: \_\_\_\_\_

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.**

- 1. Description of record or relevant part of the record: \_\_\_\_\_
- 2. Reference number, if available: \_\_\_\_\_
- 3. 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 hereunder, 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 to the record, if any, will be determined partly by the form in which access is requested.

<b>1. If the record is in written or printed form:</b>					
	copy of record*		inspection of record		
<b>2. If record consists of visual images</b> (this includes photographs, slides, video recordings, computer-generated images, sketches, etc.):					
	View the images		copy of the images*	transcription of the images*	
<b>3. If record consists of recorded words or information which can be reproduced in sound:</b>					
	Listen to the soundtrack (audio cassette)		Transcription of soundtrack* (written or printed document)		
<b>4. If record is held on computer or in an electronic or machine-readable form:</b>					
	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? <b>Postage is payable.</b>				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:

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2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

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**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?

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Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_  
20\_\_\_\_

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SIGNATURE OF REQUESTER / PERSON  
ON WHOSE BEHALF REQUEST IS MADE

Please send the completed form to:

The Legal Department, Volkswagen South Africa

Postal address:	PO Box 80, Uitenhage, 6230
Street address:	103 Algoa Road, Uitenhage, 6229
Telephone numbers:	041 - 994 4891
Fax numbers:	041 - 994 5448
Electronic Mail Address:	schady@vwsa.co.za skelton@vwsa.co.za