



CAPRICORN

CAPRICORN SOCIETY LTD

MANUAL IN TERMS OF SECTION 51 OF THE PROMOTION OF ACCESS TO INFORMATION ACT 2 OF 2000 (SOUTH AFRICA) ("Act")

CONTENTS

A - INTRODUCTION TO ENTITY

B – SECTION 51 DETAILS

1 Contact details

2 Section 10 Guide

3 Types of records

a) Records available in terms of other legislation

b) Records available without requesting access in terms of the Act

c) Records available on request

4 Request procedure

5 Remedies

6 Prescribed fees

7 Availability of manual

Annexure 1 – Request Form

**A – Introduction to Capricorn Society Ltd ABN 29 008 347 313 (Incorporated in Australia),
registered in South Africa as an external company (Reg. No. 2000/009274/10)**

Capricorn Society Ltd (**CSL**) is a company incorporated in Australia and trading in Australia, New Zealand and South Africa. CSL is a corporatised trading co-operative operating according to the 7 International Principles of Co-operation servicing its members in the automotive services and parts industry. CSL is classified as a private body for purposes of PAIA.

The power for purposes of the Act is delegated to the Sales Manager (South Africa), who is referred to in this manual as the Information Officer.

B - Section 51 Details

1. Contact Details

Postal Address:	PO Box 1284, Ferndale, Randburg 2160, South Africa
Physical Address:	326 West Ave, Ferndale, Randburg, South Africa
Phone number:	0800 993 129
Fax number:	0800 993 130
Information Officer email address:	paiaofficer@capricorn.coop
Website:	www.capricorn.coop

2. Section 10 Guide

A guide to the Act can be found at the South African Human Rights Commission's website at <http://www.sahrc.org.za> . Alternatively call the Human Rights Advice Line on: 086 012 0120 or email PAIA@sahrc.org.za.

3. Types of records

a) Records available in terms of other legislation

All records kept in terms of legislation applicable to CSL are available in accordance with the relevant legislation. This includes:

- Basic Conditions of Employment Act 75 of 1997
- Companies Act 71 of 2008
- Compensation for Occupational Injuries and Diseases Act 130 of 1993
- Consumer Protection Act 68 of 2008
- Income Tax Act 58 of 1962
- Labour Relations Act 66 of 1995
- Occupational Health and Safety Act 85 of 1993
- Skills Development Act 97 of 1998
- Skills Development Levies Act 9 of 1999
- Trademarks Act No. 194 of 1993
- Value Added Tax Act 89 of 1991
- Unemployment Insurance Act No. 30 of 1966

b) Records available without requesting access in terms of the Act

CSL has not, in terms of Section 52(2) of the Act, submitted categories of records which are automatically available without a request for access. Certain information is, however, freely available on the website at www.capricorn.coop

c) Records available on request

A requester may request access to the following information, subject to the access being denied in terms of the Act:

- a. Employment contracts: availability to be determined upon receipt of request.
- b. Member-related records and information: availability to be determined upon receipt of request.
- c. Records pertaining to CSL: availability to be determined upon receipt of request.
- d. Records related to third parties: availability to be determined upon receipt of request.
- e. Trade secrets: availability to be determined upon receipt of request.
- f. Intellectual Property: availability to be determined upon receipt of request.
- g. Supplier Agreements: availability to be determined upon receipt of request.
- h. Other Agreements: availability to be determined upon receipt of request.

4. Request procedure

A person wishing to access the records of CSL must complete the necessary request form. The request form is attached at Annexure 1 and is also available from the Information Officer or at www.sahrc.org.za.

Please ensure that when requesting information that the relevant forms are fully completed, failing which the process will be delayed until such time that the information is complete. The time periods set out in the Act will not commence until such time as all relevant information has been furnished to CSL by the requester.

The request form must contain sufficient particulars to enable the Information Officer 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 requester in the Republic of South Africa, and must identify the right that the requester is seeking to exercise or protect. The request form must also provide an explanation of why the requested record is required for the exercise or protection of that right.

If 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 manner and the necessary particulars to be informed in the other manner.

If the request is made on behalf of another person, please submit proof of the capacity in which the requester is making the request, to the reasonable satisfaction of the Information Officer.

Records and information required for the exercise or protection of any rights will be made available subject to the provisions of the Act. Access to records may be refused on grounds specified in the Act.

5. Remedies

CSL does not have any internal appeal procedures and thus the decision made by the Information Officer is final. If your request for information is refused, you have the right, within 30 days of notification of the refusal, to apply to a court of competent jurisdiction for appropriate relief.

6. Prescribed fees

The fees payable to CSL by requesters are the maximum fees prescribed by the Act or any regulations thereto. The Information Officer will inform the requester in writing of any fee payable, and CSL will withhold all records until all fees have been paid.

Information on the fees payable for requests is also available at the website www.sahrc.org.za.

7. Availability of manual

The manual is available for inspection at the offices of CSL or on CSL's website www.capricorn.coop. The manual will also be available at the offices of the South African Human Rights Commission.

Annexure 1 – Request Form

FORM C

REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY
(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:

B. Particulars of person requesting access to the record

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

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

This section must be completed <i>ONLY</i> if a request <i>for information</i> is made on behalf of <i>another</i> person.
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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

- | |
|--|
| <p>(a) A request for access to a record, other <i>than</i> a record containing personal information about yourself, will be processed only after a request fee has been paid.</p> <p>(b) You will be <i>notified of</i> the amount required to be paid as the request fee.</p> <p>(c) The fee payable for access to a record depends <i>on</i> the form <i>in which</i> access is required and the reasonable time <i>required</i> to search for and prepare a record.</p> <p>(d) If you qualify for exemption <i>of</i> the payment <i>of</i> any fee, please state the reason for exemption.</p> |
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Reason for exemption from payment of fees:

F. Form of access to record

<p>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.</p>
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Disability:	Form in which record is required
<p>Mark the appropriate box with an X.</p> <p>NOTES:</p> <p>(a) Compliance with your request in the specified form may depend on the form in which the record is available.</p> <p>(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.</p> <p>(c) The fee payable for access for the record, if any, will be determined partly by the form in which access is requested.</p>	

1. If the record is in written or printed form:

	copy of record*		inspection of record
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2. If record consists of visual images

this includes photographs, slides, video recordings, computer-generated images, sketches, etc)

	view the images		copy of the images"		transcription of the images*
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3. If record consists of recorded words or information which can be reproduced in sound:

	listen to the soundtrack audio cassette		transcription of soundtrack* written or printed document
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4. If record is held on computer or in an electronic or machine-readable form:

	printed copy of record*		printed copy of information derived from the record"		copy in computer readable form* (stiffy or compact disc)
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<p>'If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? Postage is payable.</p>
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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:
2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

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?

Signed at..... This..... day of20

SIGNATURE OF REQUESTER / PERSON ON
WHOSE BEHALF REQUEST IS MADE