

FORM B NOTICE OF INTERNAL APPEAL (Section 75 of the Promotion of Access to Information Act, 2000 (Act No. 2 of 2000)) [Regulation 8]

STATE YOUR REFERENCE NUMBER:

A. Particulars of public body

The Information Officer/Deputy Information Officer:

The Deputy information Officer:
Ms Anbigay Naicker or Ms Florence Matlala
National Department of Public Works
Private Bag x65
PRETORIA
0001

Tel. no: 012 406-1178/ 012 406 -1850

Email: anbigay.naicker@dpw.gov.za/florence.matlala@dpw.gov.za

A. Particulars of requester/third party who lodges the internal appeal

- (a) The particulars of the person who lodge the internal appeal must be given below.
- (b) Proof of the capacity in which appeal is lodged, if applicable, must be attached.
- (c) If the appellant is a third person and not the person who originally requested the information, the particulars of the requester must be given at C below.

Full names an	nd surname:													
Identity number	er:													
Postal address	s:													
Telephone number:		() Fax number: ()												
E-mail addres	s:													
Capacity in which an internal appeal on behalf of another person is lodged:														
A. Particulars	of requester													
This section m	nust be comple	eted ON	ILY if a	third pa	arty (ot	her thar	n the re	questei	r) lodge	s the in	iternal a	appeal.		
Full names an	nd surname:													
Identity number:														
•														
B. The decision	on against wh	ich the	intern	al appe	al is lo	dged								
Mark the decis	sion against w	hich the	intern	al anne	al is loc	daed wi	th an X	in the a	annronr	riate bo	х.			
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Re	Refusal of request for access													
De	Decision regarding fees prescribed in terms of section 22 of the Act													
	ecision regardi ection 26(1) of		extensi	on of th	e perio	d withir	n which	the req	uest m	ust be o	dealt wi	th in tei	ms of	
De	Decision in terms of section 29(3) of the Act to refuse access in the form requested by the requester													
De	ecision to gran	nt reques	st for a	ccess										
C. Grounds fo	r appeal													
If the provided additional folio		dequate,	please	e contin	ue on a	a separ	ate folio	and at	tach it	to this f	orm. Yo	ou must	t sign a	II the
State the grour	nds on which t	he inter	nal ann	neal ie h	ased.									
State the groun	ido dii Willdii l	ine inten	nai app	Jeai is L	ascu.									

State any other information that may be relevant in considering the appeal:

D. Notice of decision on appeal

You will be notified in writing of the decision on your internal appeal. If you wish to be informed in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request. State the manner: Particulars of manner: Signed at this day of year...... SIGNATURE OF APPELLANT FOR DEPARTMENTAL USE: OFFICIAL RECORD OF INTERNAL APPEAL: Appeal received on (date) by(state rank, name and surname of information officer/deputy information officer). Appeal accompanied by the reasons for the information officer's/deputy information officer's decision and, where applicable, the particulars of any third party to whom or which the record relates, submitted by the information OUTCOME OF APPEAL: DECISION OF INFORMATION OFFICER/DEPUTY INFORMATION OFFICER CONFIRMED/NEW DECISION SUBSTITUTED NEW DECISION: DATE RELEVANT AUTHORITY

RECEIVED BY THE INFORMATION OFFICER/DEPUTY INFORMATION OFFICER FROM THE RELEVANT

AUTHORITY ON (date):

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