

**THE INFORMATION MANUAL IN TERMS OF SECTION 51. OF
THE PROMOTION OF ACCESS TO INFORMATION
ACT NO. 2 OF 2000 (PAIA) [as AMENDED] OF**

**PETER J PYBURN
T/a PETER J PYBURN**

CONTENTS

1. INFORMATION REQUIRED UNDER SECTION 51(1) (a) OF THE ACT
2. DESCRIPTION OF GUIDE REFERRED TO IN SECTION 10: SECTION 51(1)(b)
3. RECORDS AVAILABLE IN TERMS OF OTHER LEGISLATION: SECTION 51(1)(d)
4. SUBJECTS AND CATEGORIES OF RECORDS HELD BY PETER J PYBURN: SECTION 51(1)(e)
5. DETAIL ON HOW TO MAKE A REQUEST FOR ACCESS – SECTION 51(e)
FORM C

1. INFORMATION REQUIRED UNDER SECTION 51(1) (a) OF THE ACT

1. Postal Address : PO Box 1068, Four Ways, 2055, Gauteng, Republic of South Africa.
2. Street Address : Plot 55, Poplar Avenue, Broadacres, Johannesburg, Gauteng
3. Telephone Number : 083 377 8893
4. Facsimile Numbers : 0866 688 122
5. Electronic Mail (e-mail) : peter@peterpyburn.co.za
6. Our Website : www.peterpyburn.co.za
7. Head of Organisation : Peter Pyburn

2. 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 the Human Rights Commission. It contains information required by a person wishing to exercise any right, contemplated by PAIA. It is available in all of the official languages.

The Guide is available for inspection, *inter alia*, at the office of the offices of the Human Rights Commission at 29 Princess of Wales Terrace, cnr York and St. Andrews Street, Parktown and on its website at www.sahrc.org.za

THE LATEST NOTICE IN TERMS 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

3. RECORDS AVAILABLE IN TERMS OF OTHER LEGISLATION: SECTION 51(1)(d)

NOTE : There may not be specific records that mention us by name in the records of all or any of the institutions that administer the Acts mentioned below, but the following legislation is applicable to our business;

1. The Long Term Insurance Act No. 52 of 1998 – we are registered as an Intermediary in terms hereof.
2. The Financial Advisory and Intermediary Services Act No. 37 of 2002 (FAIS) – we are categorized as a Financial Services Provider (FSP) in terms hereof and are licenced as such by the Financial Services Board, under Licence Number 2995
3. The Collective Schemes Control Act No. 45 of 2002 – we are registered as a “manager” in terms hereof.



4. The Pension Funds Act No. 24 of 1956.
5. The Medical Schemes Act No. 131 of 1998.

NOTE: Certain legislation is not directly applicable to our business, but it impacts on the activities of investors of funds and places a duty of care on the entire Financial Service Industry to ascertain the source of investment funds and in some instances (monies emanating from or subject to money laundering, drugs and drug trafficking, stolen goods, other unlawful activities as well as tax evasion) it imposes an obligation on financial advisers to report the activities of clients to the authorities. The following Acts are applicable:-

6. Drug and Drug Trafficking Act No. 140 of 1992.
7. Prevention of Organized Crime Act No. 121 of 1998
8. Financial Centre Intelligence Act NO. 38 of 2001.

4. SUBJECTS AND CATEGORIES OF RECORDS HELD BY PETER J PYBURN: SECTION 51(1)(e)

4.1 Latest Notice regarding Categories of Records

We have the following pamphlets/ brochures/ documents available without you having to follow all the request procedures contained in the Act.

Website; www.peterpyburn.co.za

Email newsletter by subscription

4.2. Records that may be requested

Administration
Licences (in terms of FAIS Act)
Correspondence

4.3 Operations - Business Conducted by the Organisation

Sales of all types of Insurance, as defined in the Long Term Insurance Act, as allowed for in terms of the granted licence
Investment Planning and Placing
Tax and Retirement Planning
Disablement Planning
Estate Planning (Estate Duty, Capital Gains Tax, Wills)
Medical Aid

4.4 Client Registry

Personal Particulars of Clients
Product Particulars of Clients
Policy Details
Premium/Contribution details
Policy Loan Payment Details
Termination Payment Details (Surrender, Maturity, Disablement, Death)
Cession and Beneficiary Details

4.5 Finances

Commission Statements (Consolidated and per Producer)
Financial Statements

5. DETAIL ON HOW TO MAKE A REQUEST FOR ACCESS – SECTION 51(e)

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 requester in the Republic,



- identify the right that the requester is seeking to exercise or protect, and 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, to submit proof of the capacity in which the requester is making the request, to the reasonable satisfaction of the head of the private body.



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 for information is made on behalf of <i>another</i> person.

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 for the record, if any, will be determined partly by the form in which access is requested.

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

<input type="checkbox"/>	copy of record*	<input type="checkbox"/>	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)

<input type="checkbox"/>	view the images	<input type="checkbox"/>	copy of the images"	<input type="checkbox"/>	transcription of the images*
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3. If record consists of recorded words or information which can be reproduced in sound:

<input type="checkbox"/>	listen to the soundtrack audio cassette	<input type="checkbox"/>	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:

<input type="checkbox"/>	printed copy of record*	<input type="checkbox"/>	printed copy of information derived from the record"	<input type="checkbox"/>	copy in computer readable form* (stiffy or compact disc)
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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.	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>

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

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke extending to the right.