



**MANUAL PREPARED IN ACCORDANCE WITH SECTION 51 OF THE PROMOTION OF ACCESS TO  
INFORMATION ACT NO 2 OF 2000  
("the Act")**

**FOR**

**PINEWOOD DMS SA (PTY) LTD  
(Registration Number 2020/689681/07)**

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## **1. COMPANY CONTACT DETAILS**

(Information required under Section 51(1)(a) of the Act)

Name of body: Pinewood DMS SA (Pty) Ltd

Physical address: Ground Floor Block G  
The Boulevard Office Park  
Searle Street  
Woodstock  
7925

Postal address: P.O. Box 363  
Eppindust  
7475

Head of body: Julie Caldicott  
Telephone no: (021) 468 5900  
Email: contact@pinewoodsa.co.za

## **2. THE ACT**

(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](http://www.sahrc.org.za).

## **3. NOTICES**

(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.

## **4. APPLICABLE LEGISLATION**

(Legislations applicable under Section 51(1)(c) of the Act)

4.1 Records kept in accordance with other statutory legislation, including but not limited to:

- 4.1.1 Companies Act 61 of 1973 and 71 of 2008
- 4.1.2 Income Tax Act 58 of 1962
- 4.1.3 Value Added Tax Act 89 of 1991
- 4.1.4 Regional Services Councils Act 109 of 1985
- 4.1.5 Unemployment Insurance Act 63 of 2001
- 4.1.6 Labour Relations Act 66 of 1995
- 4.1.7 Basic Conditions of Employment Act 75 of 1997
- 4.1.8 Employment Equity Act 55 of 1998
- 4.1.9 Compensation for Occupational Injuries and Disease Act 130 of 1993
- 4.1.10 Skills Development Levies Act 9 of 1999
- 4.1.11 Unemployment Insurance Act 63 of 2001

The above records which are of a public nature are available automatically without a person having to request access thereto in terms of the Act, as envisaged in Section 52.

DATE OF COMPILATION: 08/12/2011

DATE OF REVISION: 11/05/2021

## **5. SCHEDULE OF RECORDS**

(Information required under Section 51(1)(d) of the Act)

### 5.1 Companies Act records:

- Documents of incorporation
- Memorandum and Articles of Association
- Minutes of Board of Directors meetings
- Records relating to the appointment of directors/ auditor/ secretary/ public officer and other officers
- Share Register and other statutory registers

### 5.2 Financial records

- Annual Financial Statements
- Tax Returns
- Accounting Records
- Banking Records
  - Bank Statements
  - Paid Cheques
  - Electronic banking records
- Asset Register
- Rental Agreements
- Invoices
- Insurance Policies

### 5.3 Taxation records

- PAYE Records
- Documents issued to employees for income tax purposes
- Records of payments made to SARS on behalf of employees
- All other statutory compliances:
  - VAT
  - Skills Development Levies
  - UIF
  - Workmen's Compensation
  - Income tax

### 5.4 Personnel documents and records

- Employment contracts
- Medical Aid records
- Pension Fund records
- Disciplinary records
- Salary records
- SETA records
- Disciplinary code
- Leave records
- Training records
- Training Manuals

## 6. DETAIL ON HOW TO MAKE A REQUEST FOR ACCESS

(Subjects and categories of records held under Section 51(1)(e) of the Act)

- The requester must complete Form C and submit this form together with a request fee, to the head of the private body.
- The form must be submitted to the head of the private body at his/ her address, fax number, or electronic mail address
- 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.

## 7. REQUEST FOR ACCESS TO RECORD OF PINWOOD DMS SA (PTY) LTD (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: Chantelle Giani

Name of body:	Pinewood DMS SA (Pty) Ltd
Physical address:	Ground Floor Block G The Boulevard Woodstock 7925
Postal address:	P.O. Box 363 Eppindust 7475
Telephone no:	(021) 468 5900
Email:	contact@pinewoodsa.co.za

**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 *ONLY* if a request *for information* is made on behalf of *another* 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:

**E. 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
Form in which record is required:	
Mark the appropriate box with an X.  <b>NOTES:</b> (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.	

<b>1. If the record is in written or printed form:</b>			
<input type="checkbox"/>	copy of record	<input type="checkbox"/>	inspection of record
<b>2. If record consists of visual images</b> 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"/>		<input type="checkbox"/>	transcription of the images
<b>3. If record consists of recorded words or information which can be reproduced in sound:</b>			
<input type="checkbox"/>	listen to the soundtrack audio cassette	<input type="checkbox"/>	transcription of soundtrack written or printed document
<b>4. If record is held on computer or in an electronic or machine-readable form:</b>			
<input type="checkbox"/>	printed copy of record	<input type="checkbox"/>	printed copy of information derived from the record
<input type="checkbox"/>		<input type="checkbox"/>	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? Postage is payable.		<input type="checkbox"/> YES	<input type="checkbox"/> 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 \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF REQUESTER/PERSON  
ON WHOSE BEHALF REQUEST IS MADE