

# FORM A

## REQUEST FOR ACCESS TO RECORD OF PUBLIC BODY (Section 18(1) of the Promotion of Access to Information Act, 2000

(Act No. 2 of 2000)

[Regulation 6]

### FOR DEPARTMENTAL USE

Reference number:

Request received by

name and surname of information officer/deputy information officer on

(date) at

(place)

Request fee (if any): R.....

Deposit (if any): R .....

Access fee: R.....

.....Signature of information officer/deputy Information Officer

#### A Particulars of public body

The Information Officer/Deputy Information Officer:

South African Police Services  
National Deputy Information Officer  
Colonel Amelda Crooks  
SAPS Head Office  
Koedoe Building  
236 Pretorius Street  
Pretoria  
Telephone number: 012 393 2606  
Email: [crooksa@saps.gov.za](mailto:crooksa@saps.gov.za)

#### B Particulars of person requesting access to the record

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

Full names and surname: Alison Tilley (ODAC)

Identity number: 6701260105082

Postal address: ODAC, Springtime Studios, Second Floor, 1 Scott Road, Observatory, Cape Town

Fax number: 021 447 1191

Telephone number: 021 447 1198

E-mail address: [alison@odac.org.za](mailto:alison@odac.org.za) or [sarah@odac.org.za](mailto:sarah@odac.org.za)

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: *Right 2 Know*

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:

*Records of procurement of International Mobile Subscriber Identity (IMSI) catcher technology, also known as "Mobile location tracker" or "Base station emulator" or "Tactical Mobile phone interception device". Attached to this request is a press article describing this device.*

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**

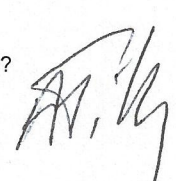
*If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1 to 4 below, state your disability and indicate in which form the record is required.*

Disability:		Form in which record is required:	
Mark the appropriate box with an X. NOTES: (a) Compliance with your request for access 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.			
1. If the record is in written or printed form:			
<input checked="" type="checkbox"/>	copy of record*	<input type="checkbox"/>	inspection of record
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 checked="" type="checkbox"/>	copy of the images*
<input type="checkbox"/>			transcription of the images*
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 checked="" type="checkbox"/>	transcription of soundtrack* (written or printed document)
4. If record is held on computer or in an electronic or machine-readable form:			
<input type="checkbox"/>	printed copy of record'	<input checked="" type="checkbox"/>	printed copy of information derived from the record*
<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.			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Note that <i>if</i> the record is not available in the language you prefer, access may <i>be granted</i> in the language in <i>which</i> the record is available.			
In which language would you prefer the record? <span style="float: right;">ENGLISH</span>			

**G. Notice of decision regarding request for access**

You will be notified 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 Cape Town this 26<sup>th</sup> day of August 2018



SIGNATURE OF REQUESTER 1 PERSON ON WHOSE BEHALF REQUEST IS MADE