



SABVEST CAPITAL
LIMITED



**PROMOTION OF ACCESS TO
INFORMATION ACT (PAIA) MANUAL**

FOREWORD

"Sabvest", "Sabvest Group", "Groups", or "We" refers to Sabvest Capital Limited and its subsidiaries, affiliates, and any of their respective associated companies and related businesses, registered in the Republic of South Africa as listed below:

- Sabvest Financial Services (Pty) Ltd
- Sabvest Finance & Guarantee Corporation (Pty) Ltd
- Sabvest Investments (Pty) Ltd

We are committed to compliance with the directives of the South African Constitution and national legislation.

The scope of the information manual is limited to the records held by Sabvest Capital Limited and its subsidiaries registered in South Africa.

1. Introduction

This manual was compiled in accordance with the Promotion of Access to Information Act (PAI) No. 2 of 2000 and to address the requirements of the Protection of Personal Information Act (POPIA) No. 4 of 2013.

PAIA and POPIA give effect to Section 32 of the South African Constitution, which focuses on the right to access information, ie, everyone has the right of access to information held by the state or a private body to enforce a culture of transparency and accountability.

Section 51 of the PAIA requires Sabvest, as a private body, to compile an information manual providing information of both the types and categories of information records held by a private body, as well as providing procedures to be followed in requesting information.

This document services as Sabvest's information manual and provides reference to the records held by Sabvest, as well as information on the process to follow to request access to such information.

2. Availability of Manual

A copy of this manual is available of Sabvest's website: www.sabvestcapital.com
Request from the designated contact person referred to in this information manual. This information manual will be updated as required or when the relevant legislation changes.

3. Contact Details

The responsibility for administration of, and compliance with POPIA and PAIA has been delegated to the Privacy Officer. Requests pursuant to the provisions of these Acts should be directed as follows:

Privacy Officer

Contact Person: Leon Rood

Postal Address: P O Box 78677, Sandton, 2146

Physical Address: 4 Commerce Square, 39 Rivonia Road, Sandhurst, 2196

Phone Number: 011 268 2400

Email: ho@sabvest.co.za

4. HRC Guide

A Guide has been compiled in terms of Section 10 of the Act by the Human Rights Commission. It contains information to assist a person wishing to exercise a right, in terms of the Act. The Guide is available for inspection, *inter alia*, as follows:

The South African Human Rights Commission Access to Information Unit
Braampark Forum 3
33 Hoofd Street, Braamfontein

Website: www.sahrc.org.za

Kindly direct all queries to:

Postal Address: Private Bag 2700, Houghton, 2041

Phone Number: 011 887 3803

Fax Number: 011 403 0625

Email: lidlamini@sahrc.org.za

5. Automatic Disclosure

The following records are automatically available to the public at the registered office of Sabvest on payment of the prescribed fee for reproduction.

- Companies and Intellectual Properties Commission (CIPC) in accordance with the requirements set out in Section 25 of the Companies Act 71 of 2008.
- The annual integrated report and any other shareholder communications as published on the website.

6. Legislative Records

Sabvest keeps information and records in accordance with legislation, which includes, but is not limited to, the following legislation:

- Basic Conditions of Employment Act 75 of 1997
- Broad-Based Black Economic Empowerment Act 53 of 2003
- Companies Act 71 of 2008
- Compensation of Occupational Injuries and Diseases Act 130 of 1993
- Electronic Communications Amendment Act 1 of 2014
- Employment Equity Act 55 of 1998
- Income Tax Act 58 of 1962
- Labour Relations Act 66 of 1995
- Occupational Health and Safety Act 85 of 1993
- Protection of Personal Information Act 4 of 2013
- Skills Development Levies Act 9 of 1999
- Tax Administration Act 28 of 2011
- Unemployment Insurance Act 63 of 2001
- Value-Added Tax Act 89 of 1991

7. Categories of Records Held by Sabvest

NOTE: If a request for information, which Sabvest deems as highly confidential information, is received, Sabvest holds the right to assess whether the disclosure of such information is appropriate and does not create a legal risk to Sabvest and/or its stakeholders.

7.1 Business Information

1. Documents of Incorporation
2. Memorandum of Incorporation, and Articles of Association
3. Records relating to the appointment of directors/auditor/company secretary/public officer and other officers
4. Share register and other statutory registers

7.2 Financial Records

1. Annual financial statements and related financial records
2. Tax returns
3. Accounting records
4. Banking records
5. Related agreements
6. Invoices
7. General correspondence

7.3 Income Tax Records

1. PAYE and related income tax records
2. Records of payments made to SARS
3. All other statutory compliances, for example:
 - VAT
 - Skills Development Levies
 - UIF
 - Workmen's Compensation

7.4 Human Resources

1. Employment contracts
2. Medical aid records
3. Pension fund records
4. Disciplinary records
5. Salary records
6. Leave records
7. Occupational Health and Safety records

8. Access Request Procedure

It is important to note that the successful completion and submission of an access request form does not automatically allow the requester access to the requested record. An application to gain access to a record is subject to certain limitations if the requested record falls within a certain category as specified in Part 3 and Chapter 4 of the PAIA. Further to this, the request for access to personal information must be in line with the provisions of Section 23 of POPIA and further in line with the applicable exemptions as per Sections 36 - 39 of POPIA.

A person who requests access to records must complete the necessary access request form,

as set out in Appendix A, and the completed form must be marked for the attention of the Privacy Officer and sent to:

Privacy Officer

Contact Person: Leon Rood

Postal Address: P O Box 78677, Sandton, 2146

Physical Address: 4 Commerce Square, 39 Rivonia Road, Sandhurst, 2196

Phone Number: 011 268 2400

Email: ho@sabvest.co.za

8.1 Completion of Access Request Form

In order to allow for a timely respond to requests for access to information, all requesters should take note of the following when completing the access request form:

- The access request form must be completed in full.
- Proof of identity is required to authenticate the identity of the requester. Therefore, in addition to the access request form, requesters will be required to supply a certified copy of their identification document (not older than 3 months).
- Provide explanation of which requested record is required for the exercise or protection of that right.
- Provide proof of the capacity in which the requester is requesting the information. Proof of identification of the requester (and related third parties acting on behalf of the requester) must be provided on submitting the access request form.
- Complete the form in BLOCK LETTERS and answer every question.
- If a question does not apply state N/A in response to that question.
- If there is nothing to disclose in reply to a particular question, state 'nil' in response to that question.
- If there is insufficient space on a printed form, additional information may be provided on an attached page.
- When the use of an attached page is required, precede answer with the applicable title.

8.2 Submission of Access Request Form

The complete access request form, together with a copy of the identity document, must be submitted either via post or email and must be addressed to the contact person as indicated above.

8.3 Request Fees

An initial request fee of R57.00 (including VAT) is payable on submission. This fee is not applicable to personal requesters referring to any person seeking to access records that contain their personal information.

Any other requester who is not a personal information requester must pay the required fee before further processing of the request in terms of Section 54 of the PAIA. Refer to Appendix B for the detailed prescribed fees.

8.4 Payment of Fees

Payment details can be obtained from the contact person as indicated above and can be made via a direct deposit. Proof of payment must be supplied. The access fee must be paid prior to access being given to the requested record.

If the request for access is successful, an access fee may be required for the search, reproduction and/or preparation of the record(s) and will be calculated based on the prescribed fees as detailed in Appendix B.

If a deposit has been paid in respect of a request for access which is refused, then the company must refund the deposit to the requester.

8.5 Notification

Sabvest will, within 30 business days of receipt of the request, decide whether to grant or decline the request and give notice with reasons to that effect.

The 30 day period within which the company has to decide whether to grant or refuse the request, may be extended for a further period of not more than 30 days, if the request is for a large volume of information and the information cannot be reasonably obtained within the original 30 day period. The company will notify the requester in writing should an extension be sought.

8.6 Grounds for Refusal

The main grounds for refusal of a request for information include but not limited to:

- Mandatory protection of the privacy of a third party who is natural or juristic person, which would involve the unreasonable disclosure of personal information of that natural or juristic person.
- Mandatory protection of the commercial information of a third party, if the record contains:
 - Trade secrets of that party.
 - Financial, commercial, scientific or technical information which disclosure could likely cause harm to the financial or commercial interests of that party.
 - Information disclosed in confidence by a third party to the company if the disclosure could put that third party to a disadvantage in negotiations or commercial competition.
 - Mandatory protection of confidential information of third parties if it is protected in terms of any agreement.
 - Mandatory protection of the safety of individuals and the protection of property.
 - Mandatory protection of records which could be regarded as privileged in legal proceedings.
 - The commercial activities of the company which may include:
 - Trade secrets of the company.
 - Financial, commercial, scientific or technical information which disclosure could likely cause harm to the financial or commercial interests of the company.
- Mandatory protection of information, if leaked or shared can result in a breach of non-disclosure agreements, confidentiality and/or other applicable legal instruments between Sabvest and a natural or juristic person.

8.7 Appeal process

Should the requester wish to appeal any part of the request process or outcome thereof, the Internal Appeal Form as per Appendix C may be completed and submitted accordingly.

FORM 2

REQUEST FOR ACCESS TO RECORD

[Regulation 7]

NOTE:

1. Proof of identity must be attached by the requester.
2. If requests made on behalf of another person, proof of such authorisation, must be attached to this form.

TO: The Information Officer

| |
|--|
| |
| |
| |
| |

(Address)

E-mail address:

Fax number:

Mark with an "X"

Request is made in my own name

Request is made on behalf of another person.

| PERSONAL INFORMATION | | | |
|---|-----------|--|------------|
| Full Names | | | |
| Identity Number | | | |
| Capacity in which request is made <i>(when made on behalf of another person)</i> | | | |
| Postal Address | | | |
| Street Address | | | |
| E-mail Address | | | |
| Contact Numbers | Tel. (B): | | Facsimile: |
| | Cellular: | | |
| Full names of person on whose behalf request is made <i>(if applicable)</i> : | | | |
| Identity Number | | | |
| Postal Address | | | |

| | | | |
|--|----------|--|-----------|
| Street Address | | | |
| E-mail Address | | | |
| Contact Numbers | Tel. (B) | | Facsimile |
| | Cellular | | |
| PARTICULARS OF RECORD REQUESTED | | | |
| <i>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. (If the provided space is inadequate, please continue on a separate page and attach it to this form. All additional pages must be signed.)</i> | | | |
| Description of record or relevant part of the record: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Reference number, if available | | | |
| Any further particulars of record | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| TYPE OF RECORD <i>(Mark the applicable box with an "X")</i> | | | |
| Record is in written or printed form | | | |
| Record comprises virtual images <i>(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)</i> | | | |
| Record consists of recorded words or information which can be reproduced in sound | | | |
| Record is held on a computer or in an electronic, or machine-readable form | | | |

FORM OF ACCESS
(Mark the applicable box with an "X")

| | |
|--|--|
| Printed copy of record <i>(including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form)</i> | |
| Written or printed transcription of virtual images <i>(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)</i> | |
| Transcription of soundtrack <i>(written or printed document)</i> | |
| Copy of record on flash drive <i>(including virtual images and soundtracks)</i> | |
| Copy of record on compact disc drive <i>(including virtual images and soundtracks)</i> | |
| Copy of record saved on cloud storage server | |

MANNER OF ACCESS
(Mark the applicable box with an "X")

| | |
|---|--|
| Personal inspection of record at registered address of public/private body <i>(including listening to recorded words, information which can be reproduced in sound, or information held on computer or in an electronic or machine-readable form)</i> | |
| Postal services to postal address | |
| Postal services to street address | |
| Courier service to street address | |
| Facsimile of information in written or printed format <i>(including transcriptions)</i> | |
| E-mail of information <i>(including soundtracks if possible)</i> | |
| Cloud share/file transfer | |
| Preferred language <i>(Note that if the record is not available in the language you prefer, access may be granted in the language in which the record is available)</i> | |

PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED

If the provided space is inadequate, please continue on a separate page and attach it to this Form. The requester must sign all the additional pages.

| | |
|--|--|
| Indicate which right is to be exercised or protected | |
| | |
| | |

| | |
|--|--|
| Explain why the record requested is required for the exercise or protection of the aforementioned right: | |
| | |
| | |

| FEES | |
|-------------|--|
| a) | <i>A request fee must be paid before the request will be considered.</i> |
| b) | <i>You will be notified of the amount of the access fee to be paid.</i> |
| c) | <i>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.</i> |
| d) | <i>If you qualify for exemption of the payment of any fee, please state the reason for exemption</i> |
| Reason | |
| | |
| | |

You will be notified in writing whether your request has been approved or denied and if approved the costs relating to your request, if any. Please indicate your preferred manner of correspondence:

| Postal address | Facsimile | Electronic communication <i>(Please specify)</i> |
|----------------|-----------|---|
| | | |

Signed at _____ this _____ day of _____ 20 _____

Signature of Requester / person on whose behalf request is made

FOR OFFICIAL USE

| | |
|--|--|
| Reference number: | |
| Request received by: <i>(State Rank, Name And Surname of Information Officer)</i> | |
| Date received: | |
| Access fees: | |
| Deposit (if any): | |

Signature of Information Officer

FORM 3
OUTCOME OF REQUEST AND OF FEES PAYABLE
 [Regulation 8]

Note:

1. If your request is granted the—
 - (a) amount of the deposit, (if any), is payable before your request is processed; and
 - (b) requested record/portion of the record will only be released once proof of full payment is received.
2. Please use the reference number hereunder in all future correspondence.

Reference number: _____

TO: _____

Your request dated _____, refers.

1. You requested:

| | |
|---|--|
| Personal inspection of information at registered address of public/private body (<i>including listening to recorded words, information which can be reproduced in sound, or information held on computer or in an electronic or machine-readable form</i>) is free of charge. You are required to make an appointment for the inspection of the information and to bring this Form with you. If you then require any form of reproduction of the information, you will be liable for the fees prescribed in Annexure B. | |
|---|--|

OR

2. You requested:

| | |
|---|--|
| Printed copies of the information (<i>including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form</i>) | |
| Written or printed transcription of virtual images (<i>this includes photographs, slides, video recordings, computer-generated images, sketches, etc</i>) | |
| Transcription of soundtrack (<i>written or printed document</i>) | |
| Copy of information on flash drive (<i>including virtual images and soundtracks</i>) | |
| Copy of information on compact disc drive (<i>including virtual images and soundtracks</i>) | |
| Copy of record saved on cloud storage server | |

3. To be submitted:

| | |
|---|--|
| Postal services to postal address | |
| Postal services to street address | |
| Courier service to street address | |
| Facsimile of information in written or printed format (<i>including transcriptions</i>) | |
| E-mail of information (<i>including soundtracks if possible</i>) | |
| Cloud share/file transfer | |
| Preferred language: (<i>Note that if the record is not available in the language you prefer, access may be granted in the language in which the record is available</i>) | |

Kindly note that your request has been:

Approved

Denied, for the following reasons:

| |
|--|
| |
|--|

4. Fees payable with regards to your request:

| Item | Cost per A4-size page or part thereof/item | Number of pages/items | Total |
|---|--|-----------------------|-------|
| Photocopy | | | |
| Printed copy | | | |
| For a copy in a computer-readable form on: | | | |
| (i) Flash drive | R40.00 | | |
| • To be provided by requestor | | | |
| (ii) Compact disc | R40.00 | | |
| • If provided by requestor | | | |
| • If provided to the requestor | R60.00 | | |
| For a transcription of visual images per A4-size page | Service to be outsourced. Will depend on the quotation of the service provider | | |
| Copy of visual images | | | |
| Transcription of an audio record, per A4-size | R24.00 | | |
| Copy of an audio record | | | |
| (i) Flash drive | R40.00 | | |
| • To be provided by requestor | | | |
| (ii) Compact disc | R40.00 | | |
| • If provided by requestor | | | |
| • If provided to the requestor | R60.00 | | |
| Postage, e-mail or any other electronic transfer: | Actual costs | | |
| TOTAL: | | | |

5. Deposit payable (if search exceeds six hours):

Yes

No

| Hours of search | Amount of deposit (calculated on one third of total amount per request) |
|-----------------|--|
| | |

The amount must be paid into the following Bank account:

Name of Bank: _____
 Name of account holder: _____
 Type of account: _____
 Account number: _____
 Branch Code: _____
 Reference Nr: _____
 Submit proof of payment to: _____

Signed at _____ this _____ day of _____ 20 _____

 Information officer

INTERNAL APPEAL FORM

FORM 4

[Regulation 9]

Reference Number:

| PARTICULARS OF PUBLIC BODY | | | |
|--|----------|--|-----------|
| Name of Public Body | | | |
| Name and Surname of Information Officer: | | | |
| PARTICULARS OF COMPLAINANT WHO LODGES THE INTERNAL APPEAL | | | |
| Full Names | | | |
| Identity Number | | | |
| Postal Address | | | |
| Contact Numbers | Tel. (B) | | Facsimile |
| | Cellular | | |
| E-Mail Address | | | |
| Is the internal appeal lodged on behalf of another person? | Yes | | No |
| If answer is "yes", capacity in which an internal appeal on behalf of another person is lodged: <i>(Proof of the capacity in which appeal is lodged, if applicable, must be attached.)</i> | | | |
| PARTICULARS OF PERSON ON WHOSE BEHALF THE INTERNAL APPEAL IS LODGED <i>(If lodged by a third party)</i> | | | |
| Full Names | | | |
| Identity Number | | | |
| Postal Address | | | |
| Contact Numbers | Tel. (B) | | Facsimile |
| | Cellular | | |
| E-Mail Address | | | |

DECISION AGAINST WHICH THE INTERNAL APPEAL IS LODGED
(mark the appropriate box with an "X")

| | |
|---|--|
| Refusal of request for access | |
| Decision regarding fees prescribed in terms of section 22 of the Act | |
| Decision regarding the extension of the period within which the request must be dealt with in terms of section 26(1) of the Act | |
| Decision in terms of section 29(3) of the Act to refuse access in the form requested by the requester | |
| Decision to grant request for access | |

GROUNDS FOR APPEAL

(If the provided space is inadequate, please continue on a separate page and attach it to this form. all the additional pages must be signed)

| | |
|---|--|
| State the grounds on which the internal appeal is based: | |
| State any other information that may be relevant in considering the appeal: | |

You will be notified in writing of the decision on your internal appeal. Please indicate your preferred manner of notification:

| Postal address | Facsimile | Electronic communication <i>(Please specify)</i> |
|----------------|-----------|---|
| | | |

Signed at _____ this _____ day of _____ 20 _____

Signature of Appellant/Third party

FOR OFFICIAL USE
OFFICIAL RECORD OF INTERNAL APPEAL

| | | | | | |
|---|-----|--|---|-----|--|
| Appeal received by: <i>(state rank, name and surname of Information Officer)</i> | | | | | |
| Date received: | | | | | |
| Appeal accompanied by the reasons for the information officer's decision and, where applicable, the particulars of any third party to whom or which the record relates, submitted by the information officer: | | | | Yes | |
| | | | | No | |
| OUTCOME OF APPEAL | | | | | |
| Refusal of request for access. Confirmed? | Yes | | New decision <i>(if not confirmed)</i> | | |
| | No | | | | |
| Fees (Sec 22). Confirmed? | Yes | | New decision <i>(if not confirmed)</i> | | |
| | No | | | | |
| Extension (Sec 26(1)). Confirmed? | Yes | | New decision <i>(if not confirmed)</i> | | |
| | No | | | | |
| Access (Sec 29(3)). Confirmed? | Yes | | New decision <i>(if not confirmed)</i> | | |
| | No | | | | |
| Request for access granted. Confirmed? | Yes | | New decision <i>(if not confirmed)</i> | | |
| | No | | | | |

Signed at _____ this _____ day of _____ 20 _____

Relevant Authority