Hello Kindred (Pty) Ltd

Section 51 Manual – Promotion of Access to Information Act

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**INTRODUCTION**

HelloKindred is an established marketing, creative and digital recruitment agency with a global footprint helping B2B or B2C businesses create capacity by drawing on a global network of skilled marketing professionals.

**INFORMATION REQUIRED UNDER SECTION 51(1)(A) OF THE ACT**

**Head of** **Hello Kindred (Pty) Ltd:** Matthew Jankelow

**Postal Address of Hello Kindred (Pty) Ltd**: Unit 9 The Straight Ave

Pine Slopes

Sandton

2194

**Street Address of Hello Kindred (Pty) Ltd**: Unit 9 The Straight Ave

Pine Slopes

Sandton

2194

**Tel. No of Hello Kindred (Pty) Ltd:** (011) 300-2700

**E- Mail address of Head of Hello Kindred (Pty) Ltd**: [matthew](mailto:jsoap@abc.net).jankelow@hellokindred.com

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

**THE LATEST NOTICE IN TERMS OF SECTION 52(2) (IF ANY): SECTION 51(1)(C)**

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.

**RECORDS AVAILABLE IN TERMS OF OTHER LEGISLATION: SECTION 51(1)(D)**

Records available in terms of other legislation are as follows:

* Labour Relations Act 66 of 1995
* Employment Equity Act 55 of 1998
* Basic Conditions of Employment Act 75 of 1997
* Compensation for Occupational Injuries and Disease Act 130 of 1993
* Companies Act 61 of 1973
* Unemployment Insurance Act 63 of 2001
* Value Added Tax Act 89 of 1991
* Income Tax Act 58 of 1962
* Skills Development Act 9 of 1999

**DETAIL ON HOW TO MAKE A REQUEST FOR ACCESS: SECTION 51(1)(E)**

* 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.

**SUBJECTS AND CATEGORIES OF RECORDS HELD BY HELLOKINDRED (PTY) LTD**

1. **COMPANIES ACT RECORDS**
   * Documents of incorporation
   * Memorandum and Articles of Association
2. **FINANCIAL RECORDS**
   * Annual Financial Statements
   * Tax Returns
   * Accounting Records
   * Banking Records Bank Statements Paid Cheques Electronic banking records
   * Asset Register
   * Rental Agreements
   * Invoices
3. **INCOME TAX 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
       - Regional Services Levies
       - Skills Development Levies
       - UIF
       - Workmen’s Compensation
4. **PERSONNEL DOCUMENTS AND RECORDS**
   * Employment contracts
   * Employment Equity Plan (if applicable)
   * Medical Aid records
   * Disciplinary records
   * Salary records
   * SETA records
   * Disciplinary code
   * Leave records
   * Training records
   * Training Manuals

**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 *(when made on behalf of another person)* |  | | | |
| Postal Address |  | | | |
| Street Address |  | | | |
| E-mail Address |  | | | |
| Contact Numbers | Tel. (B): |  | Facsimile: |  |
| Cellular: |  | | |
| Full names of person on whose behalf request is made *(if applicable):* |  | | | |
| Identity Number |  | | | |
| Postal Address |  | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Street Address |  | | | | |
| E-mail Address |  | | | | |
| Contact Numbers | Tel. (B) |  | Facsimile |  | |
| Cellular |  | | | |
| **PARTICULARS OF RECORD REQUESTED**  *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.)* | | | | | |
| Description of record or relevant part of the record: |  | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
| Reference number, if available |  | | | | |
| Any further particulars of record |  | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
|  | | | | |
| **TYPE OF RECORD**  *(Mark the applicable box with an "****X****")* | | | | | |
| Record is in written or printed form | | | | |  |
| Record comprises virtual images *(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)* | | | | |  |
| 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 *(including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form)* |  |
| Written or printed transcription of virtual images *(this includes photographs, slides, video recordings, computer-generated images, sketches, etc)* |  |
| Transcription of soundtrack *(written or printed document)* |  |
| Copy of record on flash drive *(including virtual images and soundtracks)* |  |
| Copy of record on compact disc drive*(including virtual images and soundtracks)* |  |
| 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 *(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)* |  |
| Postal services to postal address |  |
| Postal services to street address |  |
| Courier service to street address |  |
| Facsimile of information in written or printed format *(including transcriptions)* |  |
| E-mail of information *(including soundtracks if possible)* |  |
| Cloud share/file transfer |  |
| Preferred language  *(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)* |  |

|  |  |
| --- | --- |
| **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** | |
| 1. *A request fee must be paid before the request will be considered.* 2. *You will be notified of the amount of the access fee to be paid.* 3. *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.* 4. *If you qualify for exemption of the payment of any fee, please state the reason for exemption* | |
| 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**  ***(Please specify)*** |
|  |  |  |

Signed at this day of 20

***Signature of Requester / person on whose behalf request is made***

***FOR OFFICIAL USE***

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

***Signature of Information Officer***

**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:

**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 of …………………………….20……

**SIGNATURE OF REQUESTER / PERSON ON**

**WHOSE BEHALF REQUEST IS MADE**