Annexure E: Request for Access to Record

This annexure forms part of the PAIA Manual of the Victus group of companies (web version, September 2026). The main manual and the other annexures are published on the same page.

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.*

This request relates to the following entity (mark with an X):

- ☐ Victus Group (Pty) Ltd, Reg 2012/211167/07
- ☐ Victus Tax & Accounting (Pty) Ltd, Reg 2014/209882/07
- ☐ Victus Legal (Pty) Ltd, Reg 2016/037183/07
- ☐ Olympus Invest (Pty) Ltd, Reg 2022/656388/07

TO: The Information Officer
Suite 21-22, Section 14, Block C Buena Vista Office Park
1 Heuwelkruin Close
Eversdal
7550

E-mail address: johann@vgrp.co.za

*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.:**		**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.		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 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	
a) A request fee must be paid before the request will be considered. *b) You will be notified of the amount of the access fee to be paid.* *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	

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

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FOR OFFICIAL USE

Reference Number:	
Request Received by: (Name and Surname of Information Officer)	
Date Received:	
Access Fees:	
Deposit (If Any):	