

**ATC AFRICAN TRAVEL CONCEPT (PTY) LTD**

**MANUAL**

**in terms of**

**The Promotion of Access to Information Act 2 of 2000**

**and**

**The Protection of Personal Information Act 4 of 2013**

**2025**

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**NOTICE: PLEASE READ THIS MANUAL CAREFULLY BEFORE REQUESTING INFORMATION FROM US. NO INFORMATION WILL BE PROVIDED IF THE REQUIREMENTS AND PROCESSES SET OUT HEREIN ARE NOT ADHERED TO**

## 1. INTRODUCTION

- 1.1. Thank you for reading this manual, which we make available to you in accordance with section 51 of Promotion of Access to Information Act 2 of 2000, as amended from time to time (“PAIA”), the PAIA Regulations of 2021 and regulation 4(1)(d) of the Protection of Personal Information Act 4 of 2013 (“POPIA”) Regulations (the/this “Manual”).
- 1.2. A copy of this manual is available at -
  - 1.2.1. our website: [www.africantravelconcept.com](http://www.africantravelconcept.com) and
  - 1.2.2. our office, as detailed in paragraph 2.1 below, and you will be required to give us at least 7 (SEVEN) days prior written notice of your intention to come in and view this.
- 1.3. A copy of this Manual may be requested and obtained from our Deputy Information Officer in writing and at a prescribed fee.
- 1.4. Company details: We are **ATC AFRICAN TRAVEL CONCEPT (PTY) LTD**, registration number: **1997/008398/07**, a personal liability company incorporated in accordance with the company laws of the Republic of South Africa, (“we” / “us”).
- 1.5. This Manual contains the procedures and relevant legislative provisions applicable to all access to information requests submitted to us.
- 1.6. Prior to any access to information requests being granted, the requester (any person, including, but not limited to, a public body or an official thereof, making a request for access to a record of that private body; and includes a person acting on behalf of such a person) must comply with all relevant requirements in PAIA and to the extent applicable, POPIA (the “Requester”).

## 2. COMPANY DETAILS

### 2.1. Company Contact Details

Company Name:	<b>ATC AFRICAN TRAVEL CONCEPT (PTY) LTD</b>
Head of Company:	<b>JOERG SIMS</b>

Postal Address: **P.O. BOX 3311, CAPE TOWN, 8000**

Street Address: **2201 ABSA CENTRE HEERENGRACHT, CAPE TOWN, 8001**

Telephone Number: **021 426 0032**

Email: [jsims@atc-sa.co.za](mailto:jsims@atc-sa.co.za)

Website: [www.africantravelconcept.com](http://www.africantravelconcept.com)

## 2.2. **Company Information Officer Details**

Information Officer: **JOERG SIMS**

Email: [jsims@atc-sa.co.za](mailto:jsims@atc-sa.co.za)

Deputy Information Officer: **ANITA STREICH**

Email: [astreich@atc-sa.co.za](mailto:astreich@atc-sa.co.za)

## 3. **PAIA GUIDE**

- 3.1. A copy of the guide on how to use PAIA (“Guide”) is available on our website and is also available for inspection at our address stated above during normal office hours.
- 3.2. A copy of the Guide may also be requested on the form attached hereto as Annexure A free of charge.

## 4. **SCHEDULE OF RECORDS**

- 4.1. In compliance with section 51(1)(b) of PAIA, a list of records kept by us is attached as Annexure B hereto.
- 4.2. Kindly note that the table in Annexure B indicates the availability of such records, these may either be available freely to the public or will be made available the Requester, subject to a successful request in terms of the relevant PAIA or POPIA sections.

## 5. **REQUESTING ACCESS TO INFORMATION NOT PUBLICLY AVAILABLE**

The Requester must comply with the following when submitting a request for information that is not generally available to the public:

- 5.1. All the procedural requirements as set out in section 53 of PAIA.

- 5.2. Complete and submit the prescribed Request for Access to Record form, attached as Annexure C hereto. This form should be accompanied by payment of a request fee (if applicable) and a deposit (if applicable). Submission must be made to the Deputy Information Officer as set out in clause 2.2 above.
- 5.3. Provide sufficient details to enable us to identify the -
  - 5.3.1. requested record(s);
  - 5.3.2. Requester (and proof of capacity to request the record(s) on behalf of someone else);
  - 5.3.3. postal address or fax number of the Requester in the Republic;
  - 5.3.4. right which the Requester is seeking to exercise or protect with an explanation of the reason the record is required to exercise or protect the right.
- 5.4. The Requester shall be informed of the decision in writing on the form attached hereto as Annexure H.

## **6. GROUNDS FOR REFUSAL OF ACCESS TO CERTAIN RECORDS**

- 6.1. In terms of Part 3, Chapter 4 of PAIA there are a number of grounds that warrant the refusal to release certain records. Such instances include mandatory protection of -
  - 6.1.1. privacy of a third party who is natural person;
  - 6.1.2. commercial information of a third party;
  - 6.1.3. certain confidential information of a third party;
  - 6.1.4. information relating to the safety of individuals, and protection of property;
  - 6.1.5. records privileged from production in legal proceedings;
  - 6.1.6. commercial information of a private body; and
  - 6.1.7. research information of third parties, and protection of research information of private bodies.
- 6.2. Requests for records which are clearly frivolous, vexatious or involve an unreasonable diversion of resources may also be refused.

## **7. DECISION TO GRANT OR DENY ACCESS**

- 7.1. Our Deputy Information Officer will deliberate and decide on the request of the Requester within 30 (THIRTY) days of receipt of the request for access.

- 7.2. In cases where the request for access is for a large number of records or the request requires a search at more than one of our offices the period may be extended for a further period of up to 30 (THIRTY) days.
- 7.3. The company will make use of the information provided in Annexure C hereto to inform the relevant Requester of such an extension in writing.

## **8. REMEDIES FOR REFUSAL OF ACCESS TO INFORMATION REQUEST**

### **8.1. Internal Appeal**

The decision of the Deputy Information Officer is final in terms of our internal procedures for access to information. The external remedies set out below remain available to the Requester, however there is no internal appeal procedure.

### **8.2. External Appeal**

The Requester may in terms of sections 56(3)(c) and 77A submit a complaint with the Information Regulator within 180 (ONE HUNDRED AND EIGHTY) days of notification of the decision for appropriate relief, or upon exhaustion of the complaints procedure, in terms of section 78 of PAIA apply to a court for appropriate relief.

## **9. FEES**

### **9.1. Request Fee**

The Request Fee is a standard fee, which is payable before the request of the Requester will be processed.

### **9.2. Deposit**

In the event that the preparation of the records requested exceed 6 (SIX) hours, a deposit is payable equal to not more than one third of the access fees (which would be payable if the request were to be granted).

### **9.3. Payment of fees**

Records successfully requested will only be released to the Requester once all fees have been paid in full.

### **9.4. Fee structure**

The fee structure is available in accordance with the Regulations published under PAIA from time

to PAIA Manual, 2025

time and may be requested from the Deputy Information Officer.

## **10. PROTECTION AND PROCESSING OF PERSONAL INFORMATION IN LINE WITH POPIA**

- 10.1. Please take note that this Manual is subject to and should be read with our Privacy Policy, which is available at [www.africantravelconcept.com](http://www.africantravelconcept.com).
- 10.2. We respect your right to privacy, as contained in section 14 of the Constitution of the Republic of South Africa of 1996, and which forms the cornerstone of POPIA. In order for us to assist you, it may be necessary for you to share some of your Personal Information with us from time to time.
- 10.3. We will take all reasonable steps to protect the Personal Information of any Data Subjects which is in our possession. For the purposes of this section, “Data Subject”, “Personal Information”, “Processing” and “Responsible Party” will be understood in accordance with the definition provided in POPIA. Any such Personal Information that you may share with us, and the reasons why such information is required, will depend on the nature and scope of your relationship with us.
- 10.4. We attach as Annexure D hereto the types of Personal Information we Process as well as the purpose for which such Personal Information is Processed.
- 10.5. As a Responsible Party, we undertake to comply with the relevant provisions of POPIA in relation to the Processing of Personal Information.
- 10.6. In particular, we undertake and are committed to comply with the 8 (EIGHT) conditions for the lawful Processing of Personal Information contained in Chapter 3 of POPIA, as set out below:
  - 10.6.1. Accountability.
  - 10.6.2. Processing limitation.
  - 10.6.3. Purpose specification.
  - 10.6.4. Further processing limitation.
  - 10.6.5. Information quality.
  - 10.6.6. Openness.
  - 10.6.7. Security safeguards.
  - 10.6.8. Data subject participation.

- 10.7. Personal Information will be Processed by us, our representatives, our affiliates and their representatives.
- 10.8. Should the cross-border flow of Personal Information be necessary in the course of business and the purpose for which the Personal Information is Processed, it will only take place if all the conditions as set out in section 72 of POPIA are complied with.
- 10.9. We attach as Annexure E hereto a description of the security measures to be implemented to ensure protection of Personal Information.
- 10.10. Should any Data Subject object to the Processing of their Personal Information, they may lodge such objection by completing the form attached as Annexure F hereto and email the completed form to the Deputy Information Officer of the Company.
- 10.11. Should any Data Subject wish to request that we destroy Personal Information in our possession, they may complete the form attached as Annexure G hereto and email the completed form to the Deputy Information Officer of the Company. In the event that such a request is lodged, Data Subjects should take note of the fact that we may not be able to continue our relationship with you if we cannot Process your Personal Information. Of course, should any law require us to not destroy your Personal Information, a request of this nature cannot be complied with.
- 10.12. We have a comprehensive data management framework in place in order to comply with POPIA and ensure that the best efforts are employed to ensure the protection of Personal Information Processed by us. We employ up to date technology to ensure the confidentiality, integrity and availability of the Personal Information under our care.

**ANNEXURE A**

**REQUEST FOR A COPY OF THE GUIDE**

**FORM 1**

**[Regulation 2]**

I,

Full names:			
In my capacity as (mark with "x"):	Information officer		Other
Name of *public/private body ( <i>if applicable</i> )			
Postal Address:			
Street Address:			
E-mail Address:			
Facsimile:			
Contact numbers:	Tel.(B):		Cellular:

hereby request the following copy(ies) of the Guide:

Language ( <i>mark with "X"</i> )	No of copies	Language ( <i>mark with "X"</i> )	No of copies
Sepedi		Sesotho	
Setswana		siSwati	
Tshivenda		Xitsonga	
Afrikaans		English	
isiNdebele		isiXhosa	
isiZulu			

Manner of collection (*mark with "x"*):

Personal collection	Postal address	Facsimile	Electronic communication (Please specify)

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_ Signature of requester

## **ANNEXURE B: RECORDS**

The inclusion of any subject or category of records should not be taken as an indication that records falling within those subjects and/or categories will be made available under PAIA. In particular, certain grounds of refusal as set out in PAIA may be applicable to a request for such records.

The following categories of records are held by us:

- Statutory company information.
- Financial and tax records.
- Banking details.
- Human resources / Employment records.
- Intellectual property.
- Permits and licences.
- Insurance records.
- Immovable and movable property.
- Information technology.
- Specific agreements relating to our business activities.
- Policy documents.
- Miscellaneous agreements.
- Internal and external correspondence.
- Information relating to legal proceedings.
- Overseas interests and investments.
- Records pertaining to our clients/customers.

**ANNEXURE C**

**FORM2**

**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: JOERG SIMS (INFORMATION OFFICER)**  
**2201 ABSA CENTRE HEERENGRACHT, CAPE TOWN, 8001**

E-mail address: [jsims@atc-sa.co.za](mailto:jsims@atc-sa.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 <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**

*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 <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	
--	--

<b>FORM OF ACCESS</b> <i>(Mark the applicable box with an "X")</i>	
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	

<b>MANNER OF ACCESS</b> <i>(Mark the applicable box with an "X")</i>	
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) *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 <i>(Please specify)</i>

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_ \_

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

**FOR OFFICIAL USE**

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

**Signature of Information Officer**



## **ANNEXURE E: SECURITY MEASURES**

We undertake to put in place, monitor and maintain reasonable technical (electronic) and organisational (physical) security measures in order to safeguard all Personal Information Processed by us and to ensure the integrity and confidentiality of such information.

**ANNEXURE F**

**FORM 1**

**OBJECTION TO THE PROCESSING OF PERSONAL INFORMATION INTERMS OF SECTION 11(3)  
OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO.  
4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018**  
[Regulation 2]

*Note:*

1. *Affidavits or other documentary evidence as applicable in support of the objection may be attached.*
2. *If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.*
3. *Complete as is applicable*

<b>A</b>	<b>DETAILS OF DATA SUBJECT</b>
Name(s) and surname/ registered name of of data subject:	
Unique Identifier/ Identity number	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number:	
E-mail address:	
<b>B</b>	<b>DETAILS OF RESPONSIBLE PARTY</b>
Name and surname Registered name of responsible party:	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number:	
E-mail address:	

<b>C</b>	<b>REASONS FOR OBJECTION IN TERMS OF SECTION 11 (1) (d) to (f)</b> <i>(Please provide detailed reasons for the objection)</i>

Signed at ..... this ..... day of .....20.....

.....  
Signature of data subject (applicant)

**ANNEXURE G**

**FORM 2**

**REQUEST FOR CORRECTION OR DELETION OF PERSONAL INFORMATION OR DESTROYING OR DELETION OF RECORD OF PERSONAL INFORMATION IN TERMS OF SECTION 24(1) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018**  
[Regulation 3]

*Note:*

1. *Affidavits or other documentary evidence as applicable in support of the request may be attached.*
2. *If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.*
3. *Compete as is applicable.*

Mark the appropriate box with an "x".

**Request for:**

Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.

Destroying or deletion of a record of personal information about the data subject which is in possession or under the control of the responsible party and who is no longer authorised to retain the record of information.

<b>A</b>	<b>DETAILS OF THE DATA SUBJECT</b>
Name(s) and Surname/ registered name of data subject:	
Unique Identifier/ Identity number:	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number:	
E-mail address:	
<b>B</b>	<b>DETAILS OF RESPONSIBLE PARTY</b>
Name and surname of responsible party ( <i>if the responsible party is a natural person</i> ):	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number:	
E-mail address:	

Name(s) and surname/ registered name of responsible party:	
Residential, postal or business address:	
	Code (    )
Contact number(s):	
Fax number:	
E-mail address:	
<b>C</b>	<b>INFORMATION TO BE CORRECTED/ DELETED/ DESTROYED/ DESTROYED</b>
<b>D</b>	<b>REASONS FOR *CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24 (1) (a) WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY; and or REASONS FOR *DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24 (1) (b) WHICH THE RESPONSIBLE PARTY IS NO LONGER AUTHORISED TO RETAIN (Please provide detailed reasons for the request)</b>

Signed at ..... this ..... day of .....20.....

.....  
*Signature of Data subject*

**ANNEXURE H:**

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

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.	
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**O  
R**

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: (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)	

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	R60.00		
• If provided to the requestor			
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	R60.00		
• If provided to the requestor			
Postage, e-mail or any other electronic transfer:	Actual costs		
<b>TOTAL:</b>			

**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)	
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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*

JOERG SIMS