

## BC BRIDGING SOLUTIONS (PTY) LTD WEBSITE PRIVACY STATEMENT

### BC BRIDGING SOLUTIONS (PTY) LTD WEBSITE PRIVACY STATEMENT – EFFECTIVE 10 DECEMBER 2020

THIS PRIVACY STATEMENT FORMS PART OF BCBS' WEBSITE TERMS AND CONDITIONS. IF YOU DO NOT AGREE WITH ANY TERM OF THIS PRIVACY STATEMENT, YOU MUST CEASE YOUR ACCESS OF THIS WEBSITE IMMEDIATELY.

#### 1. Definitions and Interpretation

1.1. "Applicable Laws" means, in relation to a person, includes all and any –

1.1.1 statutes and subordinate legislation and common law;

1.1.2 regulations;

1.1.3 ordinances and by-laws;

1.1.4 circulars, codes of practice, directives, guidance notices, judgments and decisions of any competent authority or any governmental, intergovernmental or supranational agency, body, department or regulatory, self-regulatory or other authority or organisation; or

1.1.5 other similar provisions.

1.2. "Personal Information" means information relating to an identifiable, living, natural person and where it is applicable, identifiable, existing juristic person, including all information as defined in the [Protection of Personal Information Act 4 of 2013](#).

1.3. "Processing" means the creation, generation, communication, storage, destruction of Personal Information as more fully defined in the [Protection of Personal Information Act 4 of 2013](#).

1.4. "BCBS" means BC Bridging Solutions (Pty) Ltd, and its affiliates.

1.5. "You" or the "user" means any person who accesses and browses this website for any purpose.

1.6. "Website" means the website of BCBS at URL [www.bcbs.co.za](http://www.bcbs.co.za) or such other URL as BCBS may choose from time to time.

#### 2. Status and Amendments

2.1. BCBS respects your privacy. This privacy policy statement sets out BCBS's information gathering and dissemination practices in respect of the Website.

2.2. This Privacy Policy governs the processing of Personal Information provided to BCBS through your use of the Website.

2.3. Please note that, due to legal and other developments, BCBS may amend these terms and conditions from time to time. The version of the terms and conditions effective for this Privacy Policy are indicated by the effective date incorporated in the title of this Privacy Policy. It is your duty to remain apprised of the current version of this Privacy Policy. The date indicated in the heading of this Privacy Policy is the effective date that governs the browsing and use of this Privacy Policy from that date until the next revision of this Privacy Policy becomes effective.

2.4. By continuing to browse or use this Privacy Statement after a revised Privacy Policy becomes effective constitutes your agreement to observe this Privacy Policy as may be revised.

#### 3. Processing of Personal Information

3.1. By providing your Personal Information to BCBS you acknowledge that it has been collected directly from you and consent to its processing by BCBS.

3.2. Where you submit Personal Information (such as name, address, Community Scheme information, telephone number and email address) via the website (e.g. through completing any online form) the following principles are observed in the processing of that information:

3.2.1. BCBS will only collect Personal Information for a purpose consistent with the purpose for which it is required. The specific purpose for which information is collected will be apparent from the context in which it is requested.

3.2.2. BCBS will only process Personal Information in a manner that is adequate, relevant and not excessive in the context of the purpose for which it is processed.

3.2.3. Personal Information will only be processed for a purpose compatible with that for which it was collected, unless

you have agreed to an alternative purpose in writing or BCBS is permitted in terms of the Applicable Laws;

3.2.4. BCBS will not disclose any Personal Information relating to you to any third party unless your prior written agreement and/or consent is obtained or if BCBS is required to do so in terms of the Applicable Laws

3.2.5. If Personal Information is released with your consent BCBS will retain a record of the information released, the third party to which it was released, the reason for the release and the date of release.

3.2.6. BCBS will destroy or delete any Personal Information that is no longer needed by BCBS for the purpose it was initially collected, or subsequently processed.

3.2.7 BCBS will process your Personal Information by way of transborder server(s), if required.

#### **4. Collection of anonymous data**

4.1. BCBS may use standard technology to collect information about the use of this website. This technology is not able to identify individual users but simply allows BCBS to collect statistics.

4.2. BCBS may utilise temporary or session cookies to keep track of users' browsing habits. A cookie is a small file that is placed on your hard drive in order to keep a record of your interaction with this website and facilitate user convenience.

4.2.1. Cookies by themselves will not be used to identify users personally but may be used to compile identified statistics relating to use of services offered or to provide BCBS with feedback on the performance of this website.

4.2.2. The following classes of information may be collected in respect of users who have enabled cookies:

4.2.2.1. The browser software used;

4.2.2.2. IP address;

4.2.2.3. Date and time of activities while visiting the website;

4.2.2.4. URLs of internal pages visited; and

4.2.2.5. referrers.

4.3. If you do not wish cookies to be employed to customise your interaction with this website it is possible to alter the manner in which your browser handles cookies. Please note that, if this is done, certain services on this website may not be available.

#### **5. Security**

5.1. BCBS takes reasonable measures to ensure the security and integrity of information submitted to or collected by this website, but cannot under any circumstances be held liable for any loss or other damage sustained by you as a result of unlawful access to or dissemination of any personal information by a third party.

#### **6. Links to other websites**

6.1. STS has no control over and accepts no responsibility for the privacy practices of any third-party websites to which hyperlinks may have been provided and STS strongly recommends that you review the privacy policy of any website you visit before using it further.

#### **7. Queries**

7.1. If you have any queries about this privacy policy please contact us by emailing [info@bcbs.co.za](mailto:info@bcbs.co.za)

# 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: <input type="text"/>
	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		
<b>PARTICULARS OF RECORD REQUESTED</b>			
<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			
<b>TYPE OF RECORD</b> <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:	

<b>FEEES</b>	
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**

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**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.	
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**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:

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**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		
<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)

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**

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**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	
<b>OUTCOME OF APPEAL</b>					
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**