



## **INFORMATION MANUAL**

---

Western National Insurance Company Ltd

Prepared in terms of Section 51 of The Promotion of Access to Information Act, 2000 (hereinafter "PAIA") and to address requirements of the Protection of Personal Information Act, 2013 (hereinafter "POPIA").

## 1. INFORMATION OFFICERS

Information Officer:	Jurgen Hellweg
Deputy Information Officers:	Ruan de Villiers Akhil Ramanundh Waldo Brand
Chief Executive Officer:	Jurgen Hellweg
Postal Address:	P.O. Box 5881 Tygervalley, 7536
Physical Address:	5th Floor, The Edge, 3 Howick Close, Tygerfalls, Bellville, Cape Town 7530
Tel:	+27 (0) 21 914 0290
Fax:	+27 (0) 21 914 0293
Email Address:	<a href="mailto:compliance@westnat.com">compliance@westnat.com</a>  [Please send for the attention of the Information Officer and with the subject line "Information Request"]
Website:	<a href="http://www.westnat.com">www.westnat.com</a>

## 2. THE SOUTH AFRICAN HUMAN RIGHTS COMMISSION'S GUIDE ON HOW TO USE THE ACT

- 2.1. As contemplated in Section 10 of PAIA, the South African Human Rights Commission printed a guide on how to use PAIA. The guide is available in all official languages and contains such information as may reasonably be required by a person who wishes to exercise any right contemplated in PAIA.
- 2.2. Any enquiries regarding this guide should be directed to the South African Human Rights Commission, PAIA Unit (The Research and Documentation Department)

South African Human Rights Commission, PAIA Unit (The Research and Documentation Department)	
Postal Address:	Private Bag X2700 Houghton 2041
Tel:	+27 (0) 11 484 8300
Fax:	+27 (0) 11 484 1360
Website:	<a href="http://www.sahrc.org.za/">http://www.sahrc.org.za/</a>

## 3. TYPES OF RECORDS

- 3.1. A request for any documents will be considered on a case-by-case scenario, subject to the requirements of the PAIA.

## 4. HOW TO REQUEST INFORMATION

- 4.1. Kindly complete the form in Appendix 1.
- 4.2. If an individual is unable to complete the prescribed form because of illiteracy or disability, such a person may make the request orally.
- 4.3. If a request is made on behalf of another person, then the requester must submit proof of the capacity in which the requester is making the request to the reasonable satisfaction of the information officer.
- 4.4. Once completed, kindly submit the form to the Information Officer or the Deputy Information Officer at the postal or physical address, fax number or electronic mail address as stated above.
- 4.5. The requester must pay the prescribed fee as per Appendix 2, before any further processing can take place.
- 4.6. Western will process the request within 30 days, unless the requestor has stated special reasons, which would satisfy the Information Officer that circumstances dictate that the above time periods not be complied with.
- 4.7. Records held by the institution may be accessed by requests only once the prerequisite requirements for access have been met.
- 4.8. For purposes of this Information Manual, a requested is any person making a request for access to a record of the institution. There are two types of requesters:
  - 4.8.1. Personal Requester  
A person seeking access to a record containing personal information about him/her/itself
  - 4.8.2. Other Requester  
This person is entitled to request access to information on third parties. However, Western is not obliged to voluntarily grant access.

## 5. FEES

- 5.1. PAIA provides for two types of fees:
  - 5.1.1. A request fee, which will be a standard fee.
  - 5.1.2. An access fee, which must be calculated by taking into account reproduction costs, search and preparation time and cost, as well as postal costs.
- 5.2. When the Information Officer receives the request, he/she shall notify the requester to pay the prescribed request fee (if any), before further processing of the request. The information officer may withhold a record until the requester has paid the fees. If a deposit has been paid in respect

of a request for access, which is refused, then the Information Officer concerned must repay the deposit to the requester.

5.3. See Schedule 2 for details of fees.

## 6. REFUSAL TO GRANT ACCESS TO RECORDS

6.1. Western will, within 30 days of receipt of the request, decide whether to grant or decline the request and give notice with reasons (if required) to that effect. The 30 day period with which Western 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 number of information, or the request requires a search for information held at another office of Western and the information cannot reasonably be obtained within the original 30 day period. Western will notify the requester in writing should an extension be required.

6.2. The main grounds to refuse a request for information are:

6.2.1. Mandatory protection of privacy of a third party who is a natural person, which would involve unreasonable disclosure of personal information of that natural person;

6.2.2. Mandatory protection of the commercial information of a third party, if the record contains trade secrets of that third party; financial, commercial, scientific or technical information which disclosure could likely cause harm to the financial or commercial interest of that third party; information disclosed in confidence by a third party to the institution, if the disclosure could put that third party at a disadvantage in negotiations or commercial competition;

6.2.3. Mandatory protection of confidential information of third parties if it is protected in terms of any agreement;

6.2.4. Mandatory protection of the safety of individuals and the protection of property;

6.2.5. Mandatory protection of records, which would be regarded as privileged in legal proceedings;

6.2.6. The commercial activities of the institution, which may include trade secrets of the institution; financial, commercial, scientific or technical information which disclosure could likely cause harm to the financial or commercial interests of the institution; information which, if disclosed could put the institution at a disadvantage in negotiations or commercial competition; a computer program which is owned by the institution, and which is protected by copyright; the research information of the institution or a third party, if its disclosure would disclose the identity of the institution, the researcher or the subject matter of the research and would place the research at a serious disadvantage;

- 6.2.7. Requests for information that are clearly frivolous or vexation, or which involve an unreasonable diversion of resources shall be refused.

## 7. PROTECTION OF PERSONAL INFORMATION THAT IS PROCESSED BY WESTERN

### 7.1. Conditions of Processing

Chapter 3 of POPIA provides for the minimum conditions for Lawful Processing of Personal Information by a Responsible Party. These conditions may not be derogated from unless specific exclusions apply as outlined in POPIA.

Below is a description of the eight Conditions for Lawful Processing as contained in POPIA:

#### 7.1.1. Accountability:

The Responsible Party has an obligation to ensure that there is compliance with POPIA in respect of the Processing of Personal Information.

#### 7.1.2. Processing limitation:

Personal Information must be collected directly from a Data Subject to the extent applicable and must only be used for the purposes for which it was obtained.

#### 7.1.3. Purpose specification:

Personal Information must only be processed for the specific purpose for which it was obtained and must not be retained for any longer than it is needed to achieve such purpose.

#### 7.1.4. Further processing limitation:

Further processing of Personal Information must be compatible with the initial purpose for which the information was collected.

#### 7.1.5. Information quality

The Responsible Party must ensure that Personal Information held is accurate and updated regularly and that the integrity of the information is maintained by appropriate security measures.

#### 7.1.6. Openness:

There must be transparency between the Data Subject and the Responsible Party.

#### 7.1.7. Security safeguards:

A Responsible Party must take reasonable steps to ensure that adequate safeguards are in place to ensure that Personal Information is being processed responsibly and is not unlawfully accessed.

#### 7.1.8. Data Subject participation:

The Data Subject may request Western National Insurance Company to correct or delete Personal Information.

7.2. Purpose of the Processing of Personal Information by Western National Insurance Company Ltd

Purpose of Processing of Personal Information	Type of Processing
<ul style="list-style-type: none"> <li>✓ To provide quote(s) to a potential policyholder for non-life insurance cover as per the Insurance Act, 2017</li> <li>✓ To provide services to a policyholder in accordance with the contract of Insurance as entered between Western and the policyholder</li> <li>✓ To undertake activities related to the provision of services, including:               <ul style="list-style-type: none"> <li>○ To fulfil foreign and domestic legal, regulatory or compliance requirements</li> <li>○ To arrange for reinsurance as and when necessary and to fulfil any legal or compliance regulations in respect of reinsurance treaties</li> <li>○ To verify the identity of any potential policyholder representative or policyholder representative (inclusive of intermediaries) who contact Western</li> <li>○ For risk assessment, information security management, statistical, trend analysis and planning purposes</li> <li>○ To monitor and record calls and electronic communications with the potential policyholder or the policyholder for quality, training, investigation and fraud prevention purposes</li> <li>○ For investigations, assessments or verifications of any claim or potential claim under the contract of insurance</li> <li>○ For crime detection, prevention, investigation and prosecution</li> <li>○ To fulfil Western’s obligations to the Policyholder following a valid claim</li> <li>○ To manage the relationship between Western, the intermediary and the Policyholder</li> <li>○ To defend or enforce any of Western’s right</li> </ul> </li> </ul>	<p>Collection, recording, organisation, structuring, storage, adaptation or alteration, retrieval, consultation, use, disclosure by transmission, dissemination or otherwise making available, alignment or combination, restriction, erasure or deconstruction</p>

### 7.3. Categories of Data Subjects and their Personal Information

<b>Data Subject</b>	<b>Information Processed</b>
Potential Policyholders – natural persons	Names, contact details, postal address, physical address, ID number, date of birth, nationality, summary of assets to be insured
Potential Policyholders – juristic persons	Names of contact persons, name of entity, contact details, postal address, physical business address, registration number, summary of assets to be insured
Policyholders – natural persons	Names, contact details, postal address, physical address, ID number, date of birth, nationality, summary of assets insured inclusive of information necessary to identify the assets, value of assets and physical location of assets, banking details, tax related information
Policyholders – juristic persons	Names of contact persons, name of entity, contact details, postal address, physical business address, registration number, summary of assets insured inclusive of information necessary to identify the assets, value of assets and physical location of assets, banking details, tax related information
Intermediaries	Names of contact persons, name of entity, contact details, postal address, physical business address, registration number, FSP number, founding document, information pertaining to public liability insurance cover, banking details, tax related information
Binders and Outsource Partners	Names of contact persons, name of entity, contact details, postal address, physical business address, registration number, FSP number, founding document, information pertaining to public liability insurance cover, ultimate beneficial owners, banking details, tax related information
Service Providers	Names of contact persons, name of entity, contact details, postal address, physical business address, registration number, founding document, ultimate beneficial owners, banking details, tax related information
Directors	Names, contact details, postal address, physical address, ID number, date of birth, nationality, gender, financial interests and other directorships, credit and criminal information

### 7.4. Recipients of Personal Information:

Western National Insurance Company Ltd may provide a Data Subject's Personal Information to the following persons/entities:

- 7.4.1. All employees who reasonably need to have access to the information to adequately perform his/her job functions
- 7.4.2. Any affiliates or subsidiaries
- 7.4.3. Any service provider which must be reasonably instructed to give effect to the contract of insurance between Western and the policyholder

- 7.4.4. The relevant regulators, including but not limited to the Financial Service Conduct Authority and the Prudential Authority

## 7.5. **Cross-Border Flows of Personal Information**

Section 72 of POPIA provides that Personal Information may only be transferred out of the Republic of South Africa:

- 7.5.1. If the recipient country can offer such data an “adequate level” of protection. This means that its data privacy laws must be substantially like the Conditions for Lawful Processing as contained in POPIA ; or
- 7.5.2. If the Data Subject consents to the transfer of their Personal Information; or
- 7.5.3. If the transfer is necessary for the performance of a contractual obligation between the Data Subject and the Responsible Party; or
- 7.5.4. If the transfer is necessary for the performance of a contractual obligation between the Responsible Party and a third party, in the interests of the Data Subject; or
- 7.5.5. If the transfer is for the benefit of the Data Subject, and it is not reasonably practicable to obtain the consent of the Data Subject, and if it were, the Data Subject, would likely provide such consent.

Any Cross-Border transfers of any Personal Information by Western National Insurance Company Ltd will at all times comply with POPIA.

## 7.6. **General description of Information Security Measures**

Western National Insurance Company Ltd undertakes to institute and maintain the data protection measures to accomplish the objectives as outlined below. It is within Western National Insurance Company Ltd’s discretion to decide which measures are necessary to achieve the objectives.

- 7.6.1. Access Control of Persons to prevent unauthorised access
- 7.6.2. Data Media Control to prevent unauthorised manipulation of media
- 7.6.3. Data Memory Control to prevent unauthorised data memory input
- 7.6.4. User Control
- 7.6.5. Access Control to Data
- 7.6.6. Transmission Control to verify and trace information transmission

7.6.7. Transport Control

7.6.8. Organisation Control

**7.7. Objection to the Processing of Personal Information by a data subject**

Section 11 (3) of POPIA provides that a Data Subject may, at any time object to the Processing of his/her/its Personal Information in the prescribed form attached to this manual as Appendix 3 subject to exceptions contained in POPIA.

**7.8. Request for correction or deletion of Personal Information**

Section 24 of POPIA provides that a Data Subject may request for their Personal Information to be corrected/deleted in the prescribed form attached as Appendix 4 to this Manual.

**8. AVAILABILITY OF THE MANUAL**

8.1. The Western National Insurance Company Ltd Information Manual is made available in terms of Regulation Number R.187 of 15 February 2002. The manual will also be available on the website at [www.westnat.com](http://www.westnat.com).

## APPENDIX 1

### Application for Access to Information

Request for access to records of Western National Insurance Company Ltd in accordance with Section 53(1) of the Promotion of Access to Information Act, No 2 of 2000

#### A. PARTICULARS OF PERSON REQUESTING ACCESS TO THE RECORD

Full Name and Surname of Requester	
ID / Passport / Registration Number	
Telephone Number	
Mobile Number	

#### B. ADDRESS TO WHICH THE INFORMATION MUST BE SENT

Please select the address to which the information must be sent:

By email

By Post

By Fax

Email Address	
Postal Address	
Fax Number	

#### C. REQUEST ON BEHALF OF ANOTHER PERSON

(This section must be completed only if a request for information is made on behalf of another person)

Capacity in which the request is made on behalf of another person	
Full Name and Surname of Person on whose behalf request is made	
ID / Passport / Registration Number	

#### D. PARTICULARS OF RECORD

(If the provided space is inadequate please continue on a separate page and attach it to this form)

Full description of information required:

--

## E. FORM OF ACCESS TO THE RECORD

Please mark with an X your indication as to the required form of access.

Your indication as to the required form of access depends on the form in which the record is available.

Access in the form requested may be refused in certain circumstances. In such a case you will be informed of access will be granted in another form.

The fee payable for access to the record, if any, will be determined partly by the form in which access is requested. See Appendix 2 for details of fees.

### RECORDS IN PRINTED / WRITTEN FORM

Copy of record

Inspection of record

### RECORDS CONSISTING OF VISUAL IMAGES (PHOTOGRAPHS, VIDEOS ETC.)

View the image

Copy the image

Transcript of the image

### RECORDS IN ELECTRONIC FORMAT

Printed copy of record

Copy in computer readable form

If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? Please note that a postal fee is payable.

Yes

No

If you are prevented by a disability to read or view the record in the form of access provided for hereunder, state your disability and indicate in which form the record is required:

**F. PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED**

Indicate which right is to be exercised or protected and explain why the requested record is required for the exercising or protection of the aforementioned right:

**G. FEES (DETAILED IN APPENDIX 2)**

A request for access to a record, other than a record containing personal information about yourself, will be processed only after a request fee has been paid.

You will be notified of the amount of the request fee.

The fee payable for access to a record depends on the form in which the access is required, and the reasonable time required to search for and prepare a record.

If you qualify for exemption of the payment of any fee, please state the reason, therefore.

Reason for exemption of payment of fee:

**H. 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 thereof 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 Requested /  
Person on whose behalf request is made

## APPENDIX 2

### Schedule of Fees

- 1) The Promotion of Access to Information Act 2 of 2000 provides for two types of fees:
  - a. **Request fee** a standard administration fee paid by all requestors except personal requestors. This is not refundable.
  - b. **Access fee** paid by all requestors intended to reimburse the institution for costs involved in searching for a record and preparing it for delivery to the requestor. This fee is calculated by taking into account reproduction costs, search and preparation time and cost, as well as postal costs.
- 2) Please note:
  - a. The only charge that may be levied for obtaining records is a fee for reproduction of the record in question.
  - b. An access fee is payable in all instances where a request for access to information is granted, except in those instances where payment of an access fee is specially excluded in terms of the PAIA or an exclusion is determined by the Minister in terms of Section 54(8).
  - c. In terms of Regulation 8, Value Added Tax (VAT) must be added to all fees prescribed in terms of the Regulations.
  - d. When the Information Officer receives the request, he/she shall notify the requester to pay the prescribed request fee (if any) before further processing of the request.
  - e. The Information Officer may withhold a record until the requester has paid the fees.
  - f. If a deposit has been paid in respect of a request for access, which is refused, then the information officer concerned must repay the deposit to the requester.
- 3) The applicable fees are as follows:

<b>Reproduction Fees</b>	<b>Fee (ZAR)</b>
For every photocopy of an A4 size paper or part thereof	R1,10
For every printed copy of an A4 size page or part thereof held on a computer or in electronic or machine-readable form	R0,75
For copy in a computer readable stiffer disc	R7,50
For a copy in a computer readable form on a stiffer compact disc	R70,00
A transcription of visual images, for an A4 size page or part thereof	R40,00
For a copy of visual images	R60,00
<b>Request Fees (for requests on behalf of another person)</b>	<b>Fee (ZAR)</b>
Where a requester submits a request for access to information held by an institution on a person other than the requester himself/ herself, a request fee in the amount of R50,00 is payable upfront before the institution will further process the request received.	R50,00

Access Fees	Fee (ZAR)
For every photocopy of an A4 size paper or part thereof	R1,10
For every printed copy of an A4 size page or part thereof held on a computer or in electronic or machine-readable form	R0,75
For a copy in a computer-readable form on a stiffy disc	R7,50
For a copy in a computer readable form on a stiffy disc compact disc	R70,00
A transcription of visual images, for an A4 size page or part thereof	R40,00
For a copy of visual images	R60,00
To search for a record that must be disclosed, R30,00 for every hour or part of an hour reasonably required for such search	R30,00
Where a copy of a record needs to be posted the actual postal fee is payable	Postal fee

#### 4) Deposits

- a. Where the institution receives a request for access to information held on a person other than the requester himself/herself and the information officer upon receipt of the request is of the opinion that the preparation of the required record of disclosure will take more than 6 (six) hours, a deposit is payable by the requester.
- b. The amount of the deposit is equal to (one third) of the amount of the applicable access fee.

### APPENDIX 3

## Form to Object to the processing of Personal Information in terms of Section 11(3) of POPIA

Kindly note:

- Affidavits or other documentary evidence in support of the object needs to be attached to this form
- If more space is required, please add additional pages to this form

Details of Data Subject	
Full Name and Surname	
Address	
Email	
Mobile Number	
Details of Responsible Party	
Full Name of the Responsible Party	
Address	
Email	
Mobile Number	
Reasons for objection in terms of POPIA (Please provide full details)	

Signed at \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_, 2020

\_\_\_\_\_  
Applicant

## APPENDIX 4

### Request for amendment, correction or erasure of Personal Information in terms of Section 24(1) of POPIA

Kindly note:

- This form should **not** be used to update any sections of cover under your contract of insurance (for example to addition of removal of assets or any change in risk). Please contact your broker for assistance.
- Western National Insurance Company Ltd will endeavour to deal with your request within 30 days upon receipt of a fully completed form, together with the relevant substantiating documents.
- Western National Insurance Company retains the right to decline any request in terms of this form if such decline can be justified in terms of POPIA. Full details will be provided to the Data Subject.

Details of Person requesting Amendment, Correction or Erasure	
Full Name	
Policy Number	
Address	
Email	
Mobile Number	
Your role	
<input type="checkbox"/>	I am the Data Subject
<input type="checkbox"/>	I am not the Data Subject, but I am acting on behalf of the data subject by virtue of a power of attorney
<input type="checkbox"/>	I am not the Data Subject, but I am acting on behalf of the data subject as the parent or legal guardian
Proof of Identity and Authority to accompany this form	
<input type="checkbox"/>	Driving License
<input type="checkbox"/>	Passport
<input type="checkbox"/>	Identity Document
<input type="checkbox"/>	Power of Attorney
<input type="checkbox"/>	Evidence of parental responsibility or legal guardianship
Amendment	
<input type="checkbox"/>	I wish to amend my personal data
<input type="checkbox"/>	I wish to amend personal data concerning a data subject that I am acting on behalf of
<input type="checkbox"/>	I wish to amend personal data concerning a data subject to whom I am a parent or legal guardian
Type of personal data you wish to amend	

Describe the amendment	
<b>Correction</b>	
<input type="checkbox"/>	I wish to correct my personal data
<input type="checkbox"/>	I wish to correct personal data concerning a data subject that I am acting on behalf of
<input type="checkbox"/>	I wish to correct personal data concerning a data subject to whom I am a parent or legal guardian
Type of personal data you wish to correct	
Describe the correction	
<b>Erasure</b>	
<input type="checkbox"/>	I wish to erase my personal data
<input type="checkbox"/>	I wish to erase personal data concerning a data subject that I am acting on behalf of
<input type="checkbox"/>	I wish to erase personal data concerning a data subject to whom I am a parent or legal guardian
Type of personal data you wish to erase	

By signing this form, you certify that the information you have provided is correct to the best of your knowledge. You understand that it may be necessary to obtain further information in order to comply with this request.

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 2020

\_\_\_\_\_  
Applicant