2020/08/06

AARTO 27 - APPLICATION TO ACCESS DEMERIT POINT STATUS

INSTRUCTIONS FOR COMPLETING THE FORM

(a) The infringer who applies for his/her own demerit point status may only need to complete Part B of this form.
(b) The Employer who applies for demerit point status of an employee must ensure that this form is completed in full and that the employee signs the consent under Part C and also select the period for which the employer may have access.
(c) Organisations under Part D must provide the details of the registration number of the organisation (eg CC, company or trust registration number).
(d) The duly completed form must be submitted in terms of Regulation 33(1).
(e) A form that has not been properly completed will not be processed.
(f) Copies of the completed form must be kept for own records.

PART A – APPLICATION

I, the particulars of whom are provided under **Part B**, herewith apply in terms of Section 33 of Act 4 of 2019, to be provided with my Demerit Point status; or grant permission for the provision thereof to the organisation whose particulars are given under **Part D**.

(Please see important note on the back of this form)

PART B – PARTICULARS OF APPLICANT

Name of organisation:								Company number:	
Type of organisation:	Company	CC	Partnership					Other:	
Surname:								Gender:	Female / Male
First names:								Date of birth: YYYY / MM / DD	
Initials:								Tel (home): ( )	
ID type:	RSA ID	Passport ID	Driving licence ID	Foreign ID				Tel (work): ( )	
ID number:								Fax: ( )	
Country of issue:								Cell:	
Licence code:	A1	A	B	C1	C	EB	EC1 / EC	Email 1:	
PrDP code:	Goods		Dangerous		Passengers			Email 2:	
Postal address & code:									
								( )	
Residential address & code:									
								( )	
Employer name, address & code:									

NOTE: A copy of acceptable identification of the authorised applicant as shown above must be submitted. Issued without alterations or erasures.

	YYYY / MM / DD
Signature of applicant	**Date**

PART C – CONSENT

I, the person whose particulars appear above, or grant permission freely and voluntarily without being influenced unduly thereto, for the particulars in respect of my Demerit Point status recorded on the National Road Traffic Offences Register, to the authorised person the particulars of which appear under **Part D** below.

Period:	Once-off	6 months	12 months	
			YYYY / MM / DD	
Signature:			**Date:**	

PART D – PARTICULARS OF AUTHORISED APPLICANT

Name of organisation:									
Registration number:									
Organisation type:	Company	CC	Partnership	Other:					
Business address & code:									
Initials and surname (Representative):									
Tel (work): ( )							Email:		
Fax: ( )							Cell:		
ID number:							ID type:	RSA ID / Passport / Driving licence / Foreign ID	
Date of birth: YYYY / MM / DD							Country of issue:		

NOTE: A copy of acceptable identification of the authorised applicant as shown above must be submitted. Issued without alterations or erasures.

	YYYY / MM / DD
Signature of authorized applicant	**Date**

PART E – OFFICE USE							
Fees paid:	R						
ID of applicant verified:	Business registration number		ID type:	RSA ID	Passport	Driving licence	Other
Officer name:			Natis infrastructure No:				
Officer signature:			**Date:**	YYYY / MM / DD			

IMPORTANT NOTES

(a) In terms of Section 33 of Act 4 of 2019, only a person in his own capacity or the employer of a person can access his/her Demerit Point status after permission has been obtained.

(b) This form must be used to request your personal Demerit Point status or to grant permission to an authorised applicant to gain access to Demerit Point information of the person whose particulars are provided in **Part B**.

(c) Individuals may choose to grant permission to an authorised applicant as a once-off consent or for a longer period. In the latter case the driver is added to the authorised applicant's driver data base.

2020/08/06

AARTO 27a - APPLICATION TO ACCESS DEMERIT POINT HISTORY

INSTRUCTIONS FOR COMPLETING THE FORM

(a) The infringer who applies for his/her own demerit point status may only need to complete Part B of this form.
(b) The Employer who applies for demerit point stratus of an employee must ensure that this form is completed in full and that the employee signs the consent under Part C and also select the period for which the employer may have access.
(c) Organisations under Part D must provide the details of the registration number of the organisation (eg CC, company or trust registration number).
(d) The duly completed form must be submitted in terms of Regulation 33(1).
(e) A form that has not been properly completed will not be processed.
(f) Copies of the completed form must be kept for own records.

PART A – APPLICATION

I, the particulars of whom are provided under **Part B**, herewith apply in terms of Section 33 of Act 4 of 2019, to be provided with my Demerit Point history; or grant permission for the provision thereof to the organisation whose particulars are given under **Part D**.
(Please see important note on the back of this form)

PART B – PARTICULARS OF APPLICANT

Name of organisation :								Company number:	
Type of organisation:	Company	CC	Partnership					Other :	
Surname:								Gender:	Female / Male
First names:								Date of birth: YYYY / MM / DD	
Initials:								Tel (home): ( )	
ID type:	RSA ID	Passport ID	Driving licence ID	Foreign ID				Tel (work): ( )	
ID number:								Fax: ( )	
Country of issue:								Cell:	
Licence code:	A1	A	B	C1	C	EB	EC1	EC	Email 1:
PrDP code:	Goods	Dangerous	Passengers						Email 2:
Postal address & code:									
									( )
Residential address & code:									
									( )
Employer name, address & code:									

NOTE: A copy of acceptable identification of the authorised applicant as shown above must be submitted. Issued without alterations or erasures.

	YYYY / MM / DD
Signature of applicant	**Date**

PART C – CONSENT

I, the person whose particulars appear above, or grant permission freely and voluntarily without being influenced unduly thereto, for the particulars in respect of my Demerit Point status recorded on the National Road Traffic Offences Register, to the authorised person the particulars of which appear under **Part D** below.

Period:	Once-off	6 months	12 months	
		YYYY / MM / DD		
Signature:		**Date:**		

PART D – PARTICULARS OF AUTHORISED APPLICANT

Name of organisation:									
Registration number:									
Organisation type:	Company	CC	Partnership	Other:					
Business address & code:									
Initials and surname (Representative):									
Tel (work): ( )					Email:				
Fax: ( )					Cell:				
ID number:					ID type:	RSA ID	Passport	Driving licence	Foreign ID
Date of birth: YYYY / MM / DD					Country of issue:				

NOTE: A copy of acceptable identification of the authorised applicant as shown above must be submitted. Issued without alterations or erasures.

	YYYY / MM / DD
Signature of authorized applicant	**Date**

PART E – OFFICE USE							
Fees paid:	R						
ID of applicant verified:	Business registration number		ID type:	RSA ID	Passport	Driving licence	Other
Officer name:			Natis infrastructure No:				
Officer signature:			**Date:**	YYYY / MM / DD			

IMPORTANT NOTES

(a) In terms of Section 33 of Act 4 of 2019, only a person in his own capacity or the employer of a person can access his/her Demerit Point history after permission has been obtained.

(b) This form must be used to request your personal Demerit Point status or to grant permission to an authorised applicant to gain access to Demerit Point information of the person whose particulars are provided in **Part B**.

(c) Individuals may choose to grant permission to an authorised applicant as a once-off consent or for a longer period. In the latter case the driver is added to the authorised applicant's driver data base.