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GENERAL NOTICE

NOTICE 962 OF 2009



INDEPENDENT COMMUNICATIONS AUTHORITY OF SOUTH AFRICA (ICASA)

DRAFT REGULATIONS ON THE UNRESERVED POSTAL SERVICES

The Independent Communications Authority of South Africa (ICASA) is in the process of formulating regulations on unreserved postal services in terms of section 61(b) read with Schedule 2 of the Postal Services Act No. 124 of 1998 (the Act).

Consequently, ICASA invites the public to make submissions on the draft regulations. Those wishing to make written submissions should do so within 30 working days from the date of publication. The closing date for submissions is **21 August 2009**.

The draft regulations are also available on ICASA website:
[http:// www.icasa.org.za](http://www.icasa.org.za) and ICASA Library during the following working hours:
09h30 – 16h30.



.....
P. MASHILE
CHAIRPERSON

Written submissions should be sent to:
vietsiri@icasa.org.za or tmaruping@icasa.org.za **or hand deliver or posted to:**

Ms V. Letsiri / Ms T. Maruping
164 Katherine Street
Pinmill Farm Block A
Sandton
2146

or posted to: Ms V. Letsiri / Ms T. Maruping
Private Bag x 10002
Sandton
2146



THE INDEPENDENT COMMUNICATIONS AUTHORITY OF SOUTH AFRICA

UNRESERVED POSTAL SERVICES REGULATIONS

I, Paris Mashile, Chairperson of the Independent Communications Authority of South Africa ("the Authority") acting on behalf of the Council of the Authority hereby approve and publish draft regulations in the Schedule, made in terms of Section 61 sub-sections (b) and (c) of the Postal Services Act, 1998 (Act No. 124 of 1998).



PARIS MASHILE

CHAIRPERSON

ICASA

SCHEDULE

1. DEFINITIONS

In these regulations, unless the context otherwise indicates, a word or expression to which a meaning has been assigned in the Act has the meaning so assigned. .

“the Act” means the Postal Services Act, 1998 (Act No 124 of 1998);

“applicant” means a person who has submitted an application for registration , renewal, amendment, surrender or transfer of a certificate;

“business day” means any day from Monday to Friday 08:30 – 16:00 excluding weekends and public holidays

“fees” means the applicable charges as may be prescribed and payable by a registrant or applicant in terms of regulation 5 of these Regulations;

“registrant” means a person issued with registration certificate in terms of Section 20 of the Act;

“transfer” means to assign, cede or transfer a registration certificate from one person to another;

“unreserved postal services” means services contemplated in Schedule 2 of the Act.

2. PURPOSE OF THE REGULATIONS

The purpose of these regulations is to:

- (1) regulate unreserved postal services;
- (2) provide for registration categories;
- (3) provide for the duration of the registration certificate;
- (4) provide for the registration fees payable.

3. SCOPE

The regulations apply to all operators who offer postal services listed in Schedule 2 of the Act.

4. APPLICATION FOR REGISTRATION CERTIFICATE

- (1) Applications for registration to the Authority must be in writing and completed in accordance with **FORM A**.
- (2) Applications must be submitted to the Authority before 16H00 during business day.
- (3) Any fee in respect of an application for registration may be paid by way of an electronic transfer or via a direct deposit into the Authority's bank account. Proof of payment must accompany the application for the registration certificate.
- (4) The application fee referred to in sub-regulation (3) of these regulations is non-refundable.

5. APPLICATION FOR RENEWAL OF A REGISTRATION CERTIFICATE

- (1) All applications for renewals must be in writing and completed in accordance with **FORM B**.
- (2) Renewal applications must be submitted to the Authority before 16H00 during business day.
- (3) A fee of R1000.00(one-thousand rand only) in respect of an application for renewal may be paid by way of an electronic transfer or via a direct deposit into the Authority's bank account.
- (4) Proof of payment must accompany the renewal application for the registration certificate and;
- (5) The application fee referred to in sub-regulation (3) of these regulations is non-refundable.

6. CHANGE OF INFORMATION

- (1) The registrant must notify the Authority in the event that any information in the registration certificate changes subsequent to the granting thereof.
- (2) A notice of change of information must be submitted in the format as set out in **FORM C**.
- (3) A registrant must submit the notice within 15 business days from the date of change of information.

7. REGISTRATION CATEGORIES

The Authority has identified the following registration categories.

(1) **International unreserved service:**

Refers to registrants who offer unreserved services within and beyond the borders of the Republic of South Africa.

(2) **National unreserved service:**

Refers to registrants who offer services within the borders of the Republic of South Africa

(3) **Intra city unreserved service:**

Refers to registrants who offer services within a single city.

8. REGISTRATION FEE

In addition to application fee of R1 000.00 for registration payable by all applicants, the following annual registration fee per category will apply:

International R10 000.00

National R5 000.00

Intra city R1 000.00

9. DURATION OF CERTIFICATE

A Registration certificate is valid for a period of three (3) years from the date of issue.

10. CONTRAVENTIONS AND PENALTIES

A person who contravenes or fails to comply with the terms and conditions of his registration certificate is subject to a penalty not exceeding R 250 000.00.

11. SHORT TITLE AND COMMENCEMENT

These regulations are called "Unreserved Postal Services Regulations, 2009" and shall come into operation on 01 September 2010.

12. REPEAL AND AMENDMENT OF REGULATIONS

The regulations published in Government Gazette No. 27309 on 21 February 2005 are hereby repealed in their entirety.

1.1.4 Permanent residential address of applicant

.....

1.1.5. Principal place of business

.....

1.1.6 Telephone number:

1.1.7 Fax number:.....

1.1.8 Mobile number:

1.1.9 e-mail address.....

1.2 Juristic Persons

1.2.1. Name of Business

.....

1.2.2 Name of Business as it is to appear on certificate

.....

1.2.3 Area(s) of operation (tick the appropriate box)

International	National	Intra city

1.2.4 Nature of Business:

.....
.....
.....
.....

1.2.5 Registration Number

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1.2.6 Principal place of business:

.....
.....
.....
.....

1.2.6.1 Postal address

.....
.....
.....
.....

1.2.6.2 Telephone number

1.2.6.3 Fax number

1.2.6.4 Mobile number

1.2.6.5 e-mail address.....

1.2.7 Does the business have shares in other entities in the Postal Services sector (Y / N)

1.2.8 Is the business part of other entities in the Postal Services sector (Y / N)

1.2.9 Is there a controlling entity other than the applicant? (Y / N)

If yes to any of the above, attach proof that will have among others the following:(Name, Date of birth, Gender, Identity number, Physical Address, Postal Address, Telephone number, Nationality, Directorship held, Occupation) Attach also details of the controlling entities and the relevant documentation.

Please attach certified copies of all founding documents must accompany this application form.

2 Description of the Service (additional pages may be affixed if required)

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.....
.....
.....

3 Any other information the applicant deems relevant

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.....
.....
.....

I certify that this declaration was signed and sworn to before me at..... on the day of 20...., by the deponent who acknowledges that he/she:

1. Knows and understands the contents hereof;
2. Has no objection to taking the prescribed oath or affirmation; and
3. Considers this oath or affirmation to be truthful and binding on his/her conscience

COMMISSIONER OF OATHS

Name:

Address:

Capacity:



Independent Communications Authority of South Africa
 Pinmill Farm, 164 Katherine Street, Sandton
 Private Bag X10002, Sandton, 2146

FORM B

APPLICATION FOR RENEWAL

1. PARTICULARS OF REGISTRANT	
1.1 Registration Certificate Number:	
1.2 Nature of services authorised to be provided in terms of the registration certificate	
1.3 Expiration date of the certificate	
1.4 Attach a copy of the registration certificate that is the subject of this application marked clearly as appendix 1 of form B	

1. Particulars of the Applicant

1.1 Natural Persons:

1.1.1 Name of the applicant.....

1.1.2 Nature of business.....

.....

1.1.3 Identification number of applicant

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1.1.4 Permanent residential address of applicant

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1.1.5. Principal place of business

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.....
.....
.....

1.1.6 Telephone number:

1.1.7 Fax number.....

1.1.8 Mobile number

1.1.9 e-mail address.....

1.2 Juristic Persons

1.2.1. Name of Business

.....

1.2.2. Name of Business as it is to appear on certificate

.....

1.2.3. Area(s) of operation (tick the appropriate box)

International	National	Intra city

1.2.4. Nature of Business:

.....

.....

.....

.....

1.2.5 Registration Number

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1.2.6 Principal place of business:

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1.2.6.1 Postal address

.....

.....

.....

.....

1.2.6.2 Telephone number:

1.2.6.3. Fax number:

1.2.6.4. Mobile number:.....

1.2.6.5. e-mail address.....

1.2.7. Does the business have shares in other entities in the Postal Services sector (Y / N)

1.2.8. Is the business part of other entities in the Postal Services sector (Y / N)

1.2.9. Is there a controlling entity other than the applicant? (Y / N)

If yes to any of the above, attach proof that will have among others the following:(Name, Date of birth, Gender, Identity number, Physical Address, Postal Address, Telephone number, Nationality, Directorship held, Occupation) Attach also details of the controlling entities and the relevant documentation.

Please attach certified copies of all founding documents must accompany this application form.

2. Description of the Service (additional pages may be affixed if required)

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.....

3. Any other information the applicant deems relevant

.....
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.....
.....

I certify that this declaration was signed and sworn to before me
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COMMISSIONER OF OATHS

Name:

Address:

Capacity:



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 Pinmill Farm, 164 Katherine Street, Sandton
 Private Bag X10002, Sandton, 2146

FORM C

NOTICE OF CHANGE OF INFORMATION

1. PARTICULARS OF REGISTRATION CERTIFICATE	
Registration certificate number	
Attach a copy of registration certificate that is subject to this application, marked clearly as Appendix 1 of FORM C	

2. CHANGE OF INFORMATION	
2.1 Indicate whether the updated information relates to:	
2.1.1. Name and contact details of the registrant; and /or	
2.1.2. Type of service provided by the registrant	
2.1.3. Other (provide details)	

3. PARTICULARS OF REGISTRANT		
Registrant must provide the information requested in this section even where no change has occurred in relation to the registrant's particulars		
		Indicate with x where the information in question has changed
3.1. Full name of applicant		
3.2. Nature of business		

3.3. Identification number of applicant		
3.4. 3.5. Principal place of business (if different from street address)		
3.6. Telephone numbers		
3.7 Mobile number		
3.8 Fax number		
3.9 email address		

1. New information of the registrant

1.1 Natural Persons:

1.1.1. Name of the applicant.....

1.1.2. Nature of business.....

.....

1.1.3. Identification number of applicant

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1.1.4. Permanent residential address of applicant

.....

1.1.5. Principal place of business

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.....

1.1.6. Telephone number:

1.1.7. Fax number:.....

1.1.8. Mobile number:

1.1.9. e-mail address.....:

1.2 Juristic Persons

1.2.1. Name of Business

.....

1.2.2. Name of Business as it is to appear on certificate

.....

1.2.3. Area(s) of operation (tick the appropriate box)

International	National	Intra city

1.2.4. Nature of Business:

.....

.....

.....

1.2.5 Registration Number

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1.2.6 Principal place of business:

.....

1.2.6.1 Postal address

.....

1.2.6.2. Telephone number:

1.2.6.3. Mobile number:.....

1.2.6.4. Fax number:

1.2.6.5 e-mail address.....

1.2.6.6 Does the business have shares in other entities in the Postal Services sector (Y / N)

1.2.6.7. Is the business part of other entities in the Postal Services sector (Y / N)

1.2.6.8. Is there a controlling entity other than the applicant? (Y / N)

If yes to any of the above, attach proof that will have among others the following:(Name, Date of birth, Gender, Identity number, Physical Address, Postal

Address, Telephone number, Nationality, Directorship held, Occupation) Attach also details of the controlling entities and the relevant documentation.

Please attach certified copies of all founding documents must accompany this application form.

4. Description of the Service (additional pages may be affixed if required)

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5. Any other information the applicant deems relevant

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I certify that this declaration was signed and sworn to before me at..... on theday of 20..., by the deponent who acknowledges that he/she:

- 1. Knows and understands the contents hereof;
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