GENERAL NOTICE

NOTICE 116 OF 2014

DEPARTMENT OF JUSTICE AND CONSTITUTIONAL DEVELOPMENT

INVITATION FOR PUBLIC COMMENTS ON

THE PROMOTION OF NATIONAL UNITY AND RECONCILIATION ACT, 1995: AMENDMENT OF REGULATIONS ON EXHUMATION, REBURIAL OR SYMBOLIC BURIAL OF DECEASED VICTIMS

1. INVITATION

- 1.1 The Department of Justice and Constitutional Development invites interested parties to submit written comments on the proposed amendments to the Regulations which are attached hereto as Annexure A. The proposed amendments and a note, explaining the background of the proposed amendments, are also available on the website of the Department at the following address: http://www.justice.gov.za.
- 1.2 The comments on the proposed amendments to the Regulations must be submitted not later than 31 March 2014, marked for the attention of Ms I Botha or Ms F Bhayat, and
 - (a) if they are forwarded by post, be addressed to The Director-General: Justice and Constitutional Development
 Private Bag X81
 Pretoria
 0001
 - (b) if they are delivered by hand, be delivered at Salu Building, Room 23.23 or 23.09
 315 Thabo Schume Street
 Pretoria
 - (c) if they are delivered by email, be emailed to inbotha@justice.gov.za or fbhayat@justice.gov.za
 - (d) if they are faxed, be faxed to **086 648 2289** or **086 754 8493**
- 1.3 For further information, please do not hesitate to contact Ms I Botha at 012 406 4756 or Ms F Bhayat at 012 406 4771.

2. BACKGROUND NOTE

The following background information is hereby furnished in order to assist interested parties to comment on the proposed amendments to the regulations.

2.1 On 26 June 2003 Parliament, in terms of section 27 of the Promotion of National Unity and Reconciliation Act, 1995 (Act No. 34 of 1995) (the Act), approved the decisions of the Joint Committee, which was established to consider the recommendations put forward by the Truth and Reconciliation Commission (the TRC), relating to the granting of reparations to victims. One of the categories of reparation approved, is medical benefits and other forms of social assistance. In terms of section 27 of the Act, the said decisions must be implemented by the President by making regulations.

- 2.2 The regulations on exhumation, reburial and symbolic burial of deceased victims were published in the *Gazette* on 07 May 2010 under the scope of the abovementioned category. The purpose of the Regulations is to assist the families of the approximately 500 persons who went missing and were reported to the TRC as being unaccounted for. The Regulations enable them to attend exhumation procedures, to obtain legal and financial assistance in respect of applications for orders presuming the death of missing persons and to receive financial assistance with the reburials of the remains of such persons when they are found through investigations by the Missing Persons Task Team (the MPTT), located within the National Prosecuting Authority.
- 2.3 The proposed amendments to the Regulations make provision for the following additional forms of assistance: Travel and subsistence allowances for the family members of a missing person or a deceased victim when they attend a cleansing ceremony and a hand-over ceremony and assistance to purchase an animal to be slaughtered for the purposes of a cleansing ceremony performed in respect of a deceased victim.

The proposed amendments to the regulations also make provision for the following: an increase in the travelling and subsistence allowances for the family members of a deceased victim in order to attend an exhumation procedure, an obligation on the Department, in certain circumstances, to supply a coffin and other related funeral items and accessories not exceeding R12 000,00, for the purposes of a hand-over ceremony, an escalation clause so as to ensure that the amounts determined in terms of the Regulations remain adequate due to regular general price increases and consequential amendments which are to be effected to certain regulations in view of the new forms of assistance that are to be included in the Regulations.

ANNEXURE A GOVERNMENT NOTICE

DEPARTMENT OF JUSTICE AND CONSTITUTIONAL DEVELOPMENT

No. R. 2014

PROMOTION OF NATIONAL UNITY AND RECONCILIATION ACT, 1995

AMENDMENT OF REGULATIONS ON EXHUMATION, REBURIAL OR SYMBOLIC BURIAL OF DECEASED VICTIMS

The President has, under section 27(2) of the Promotion of National Unity and Reconciliation Act, 1995 (Act No. 34 of 1995), made the Regulations in the Schedule.

SCHEDULE

Definitions

may -

1. In this Schedule "the Regulations" means the regulations published by Government Notice No. R. 356 of 7 May 2010.

Amendment of regulation 1 of the Regulations

- 2. Regulation 1 of the Regulations is hereby amended by —
- (a) the insertion of the following definition after the definition of "Accounting Officer":
 - "cleansing ceremony' means a ceremony during which the relatives of a deceased victim observe customary rituals to secure a safe passage for the deceased and to clean the relatives of the deceased victim from impurity or to remove bad luck from them;";
- (b) the insertion of the following definition after the definition of "Fund Administrator":
 - "hand-over ceremony means the ceremony during which the Department hands over the remains of a deceased victim, which have been found during an exhumation procedure contemplated in regulation 3(2(a), to the relatives of a deceased victim;" and
- the substitution for the definition of "recipient" of the following definition: "recipient" means a person designated for purposes of regulations 4, 4A, 4B, 5, 5A, 5B and 6 of the Regulations by the requester, after consultation with the other relatives of the missing person or deceased victim;".

Amendment of regulation 3 of the Regulations

- **3.** Regulation 3 of the Regulations is hereby amended by -
- (a) the substitution for paragraph (b) of subregulation (1) of the following paragraph:
- "(b) A relative of a deceased victim may request the assistance as provided for in subregulation (2)(c), (d), and (e)."; and
- (b) the substitution for subregulation (2) of the following subregulation:
 - "(2) The assistance provided for in subregulation (1)
 - (a) be in the form of the allowances as provided for in regulations 4 and 5 as a contribution towards the travel and subsistence expenses to be incurred in connection with the attendance of the exhumation procedures relating to a missing person;
 - (b) be in the form of legal or financial assistance for the purpose of an application to the High Court for an order presuming the death of a missing person as provided for in regulation 6;
 - (c) be a once-off grant of-
 - (i) R17 000,00 for each reburial as a contribution towards the expenses to be incurred in connection with the reburial of a deceased victim; or

- (ii) R8 500,00 for each symbolic burial as a contribution towards the expenses to be incurred in connection with the symbolic burial of a deceased victim.".
- (d) be in the form of the allowances as provided for in regulations 4A and 5A as a contribution towards the travel and subsistence expenses to be incurred in connection with the attendance of a cleansing ceremony in respect of a deceased victim;
- (e) be in the form of a payment of an amount provided for in regulation 5E to purchase an animal to be slaughtered for the purposes of a cleansing ceremony in respect of a deceased victim; and
- (f) be in the form of the allowances as provided for in regulations 4B and 5B as a contribution towards the travel and subsistence expenses to be incurred in connection with the attendance of a hand-over ceremony."

Amendment of regulation 4 of the Regulations

4. Regulation 4 of the Regulations is hereby amended by the substitution for the expression "R3,00" in paragraph (a) of subregulation (2) of the expression "R3,88".

Insertion of regulation 4A in the Regulations

5. The following regulation is hereby inserted after regulation 4 of the Regulations:

"Transport and travelling allowances in connection with cleansing ceremony

- **4A.** (1) The requester and not more than three recipients may, at the expense of the Fund, make use of private or public transport provided for in subregulations (2), (3) and (4) in order to attend a cleansing ceremony in respect of a deceased victim.
- (2) The requester and the recipients are each entitled to the following allowance:
 - (a) In the case of private transport, R3,88 per kilometre calculated along the shortest route; or
 - (b) in the case of public transport, an amount equal to the fare for the least expensive transport along the shortest route.
- (3) Economy class air transport may be used by the requester and the recipients only if the Fund Administrator-
- (a) is satisfied that the use thereof is warranted; and
- (b) has in writing approved the use thereof prior to the journey.
- (4) The requester and the recipients are each entitled to the allowance, as provided for in subregulations (2) and (3), when required to travel from one place to another if the cleansing ceremony is conducted at different places.
- (5) On submission of satisfactory proof, the requester and the recipients are each entitled to be reimbursed for any

reasonable actual expenses incurred in respect of parking and toll fees.".

Insertion of regulation 4B in the Regulations

6. The following regulation is hereby inserted after regulation 4A of the Regulations:

"Transport and travelling allowances in connection with handover ceremony

- **4B.** (1) The requester and not more than nine recipients may, at the expense of the Fund, make use of private or public transport provided for in subregulations (2), (3) and (4) in order to attend a hand-over ceremony.
- (2) The requester and the recipients are each entitled to the following allowance:
 - (a) In the case of private transport, R3,88 per kilometre calculated along the shortest route; or
 - (b) in the case of public transport, an amount equal to the fare for the least expensive transport along the shortest route.
 - (3) Economy class air transport may be used by the requester and the recipients only if the Fund Administrator-
 - (a) is satisfied that the use thereof is warranted; and
 - (b) has in writing approved the use thereof prior to the journey.
 - (4) On submission of satisfactory proof, the requester and the recipient are entitled to be reimbursed for any reasonable actual expenses incurred in respect of parking and toll fees.".

Amendment of regulation 5 of the Regulations

- 7. Regulation 5 of the Regulations is hereby amended by -
- (a) the substitution for the expression "R800,00" in paragraph (a) of subregulation (1) of the expression "R1400,00";
- (b) the substitution for the expression "R250,00" in paragraph (b) of subregulation (1) of the expression "R320,00"; and
- (c) the substitution for the expression "R60,00" in paragraph (c) of subregulation (1) of the expression "R100,00".

Insertion of regulation 5A in the Regulations

8. The following regulation is hereby inserted after regulation 5 of the Regulations:

"Subsistence allowances in connection with cleansing ceremony

- **5A.** (1) The requester and not more than three recipients are, for the purposes of attending a cleansing ceremony in respect of a deceased victim, each entitled to the following subsistence allowance:
- (a) A maximum amount of R1400,00 for each period of 24 hours of absence from his or her residence if it is, in the opinion of the Fund Administrator, necessary to hire accommodation, subject to a total maximum of 48 hours of absence; or
- (b) a maximum amount of R320,00 for each period of 24 hours of absence from his or her residence if it is not necessary to hire

- accommodation, subject to a total maximum of 48 hours of absence; and
- (c) R100,00 for incidental expenditure for each period of 24 hours, or part thereof, of absence from his or her residence if the Fund Administrator is satisfied that the expenditure was necessary and reasonable.
- (2) The allowances provided for in subregulations (1)(a) and (b) must be utilised for accommodation, all meals and refreshments.".

Insertion of regulation 5B in the Regulations

9. The following regulation is hereby inserted after regulation 5A of the Regulations:

"Subsistence allowances in connection with hand-over ceremony

- **5B.** (1) The requester and not more than nine recipients are, for the purposes of attending a hand-over ceremony, each entitled to the following subsistence allowance:
- (a) A maximum amount of R1400,00 for each period of 24 hours of absence from his or her residence if it is, in the opinion of the Fund Administrator, necessary to hire accommodation, subject to a total maximum of 48 hours of absence; or
- (b) a maximum amount of R320,00 for each period of 24 hours of absence from his or her residence if it is not necessary to hire accommodation, subject to a total maximum of 48 hours of absence; and
- (c) R100,00 for incidental expenditure for each period of 24 hours, or part thereof, of absence from his or her residence if the Fund Administrator is satisfied that the expenditure was necessary and reasonable.
- (2) The allowances provided for in subregulations (1)(a) and (b) must be utilised for accommodation, all meals and refreshments."

Insertion of regulation 5C in the Regulations

10. The following regulation is hereby inserted after regulation 5B of the Regulations:

"Provision of coffin and funeral items and accessories

- **5C.** (1) Subject to subregulation (2), the Department must, provide a coffin and funeral items and accessories, not exceeding the amount of R12 000,00 for the purposes of a hand-over ceremony.
 - (2) The Department is not obliged to provide a coffin—
- (a) if the relatives of a deceased victim have provided a coffin;
- (b) if a coffin has been donated by any person or institution; or
- (c) subject to subregulation (3), if-
 - (i) burial support is available in respect of a deceased victim in terms of section 5 of the Military Veterans Act, 2011 (Act No. 18 of 2011); or
 - (ii) funeral benefits are payable in respect of a deceased victim in terms of section 6F of the Special Pensions Act, 1996 (Act No. 69 of 1996).

- (3) The Department may, notwithstanding the availability of burial support or the entitlement to funeral benefits referred to in subregulation (2)(c), provide a coffin for the purposes of a hand-over ceremony, if it appears to the Fund Administrator that the relatives of the deceased victim are unable, for whatever reason, to provide a coffin timeously for the purposes of the ceremony.
- (4) The Department must liaise with the relatives of a deceased victim on the coffin to be provided.".

Insertion of regulation 5D in the Regulations

11. The following regulation is hereby inserted after regulation 5C of the Regulations:

"Escalation of Amounts

- **5D.** (1) The amounts referred to in these Regulations must be increased automatically with 5% on 1 January 2015 and thereafter on the first day of January of every consecutive year.
- (2) The accounting officer must, by not later than 31 January of each year, in writing confirm the new amounts, which amounts must be made available on the website of the Department.".

Insertion of regulation 5E in the Regulations

12. The following regulation is hereby inserted after regulation 5D of the Regulations:

"Other assistance in connection with cleansing ceremony

5E. A maximum amount of R1 500,00 may be paid from the Fund to a requester to purchase an animal to be slaughtered for the purposes of a cleansing ceremony performed in respect of a deceased victim."

Amendment of regulation 7 of the Regulations

- **13.** Regulation 7 of the Regulations is hereby amended by the substitution for paragraph (h) of subregulation (4) of the following paragraph:
 - "(h) by a document confirming the death and date of death of the deceased victim, if assistance as provided for in regulation 3(2)(c), (d) and (e) is requested; and".

Amendment of regulation 8 of the Regulations

- **14.** Regulation 8 of the Regulations is hereby amended by the substitution for subparagraph (iii) of paragraph (b) of subregulation (1) of the following subparagraph:
 - "(iii) the assistance is requested—
 - (aa) in connection with an exhumation of a missing person as provided for in regulation 3(2)(a);
 - (bb) for the purpose of an application as provided for in regulation 3(2)(b);
 - (cc) for a reburial or symbolic burial of a deceased victim as provided for in regulation 3(2)(c);
 - (dd) in connection with a cleansing ceremony in respect of a deceased victim as provided for in regulation 3(2)(d); or

(ee) in connection with a handover ceremony as provided for in regulation 3(2)(e); and ".

Amendment of regulation 10

- **15.** Regulation 10 of the Regulations is hereby amended by the substitution for paragraph (*c*) of subregulation (1) of the following paragraph:
 - "(c) in the case of assistance as provided for in regulation 3(2)(a), (c), (d), (e) or (f) to the requester or the recipient or a person appointed in writing by the requester or recipient, in which case proof of identify of the person appointed is required; and".

Substitution of regulation 14

- **16.** The following regulation is hereby substituted for regulation 14:
- "Application of Regulations
- **14.** These Regulations are applicable in respect of an exhumation, a cleansing ceremony, a handing over ceremony, reburial or symbolic reburial conducted in South Africa."

Substitution of Annexure

17. The Annexure to the Regulations is hereby substituted by the following Annexure:

"ANNEXURE

REQUEST FOR ASSISTANCE IN RESPECT OF EXHUMATION, REBURIAL OR SYMBOLIC BURIAL OF DECEASED VICTIMS PROMOTION OF NATIONAL UNITY AND RECONCILIATION ACT, 1995 (ACT 34 OF 1995)

[Regulation 7]

Note:

- The information and documents requested in this form are required in order to provide assistance to relatives of missing persons and deceased victims in respect of—
 - (a) the exhumation of the remains of missing persons;
 - (b) applications for orders for presuming the death of missing persons;
 - (c) the reburial or symbolic burial of deceased victims;
 - (d) the attendance and performance of a cleansing ceremony in respect of a deceased victim; and
 - (e) the attendance of a hand-over ceremony.
- 2. Use this form to request assistance as indicated in note 1 above.
- Only a relative designated by the other relatives of the missing person or deceased victim may request assistance by completing this form.
- 4. You are a relative of a missing person or deceased victim if you are
 - a parent of, or somebody who exercised parental control over, the missing person or deceased victim;
 - (b) a person who was married to the missing person or deceased victim under any tradition or a system of religious, personal or family law;
 - (c) a child of the missing person or deceased victim, irrespective of whether or not you were born in or out of wedlock or were legally adopted;
 - (d) a person to whom the missing person or deceased victim had a duty of support in terms of the common law, customary law or legislation; or
 - (e) a person who was a blood relation of the missing person or deceased victim.
- 5. The person who requests assistance and not more than 3 other relatives of a missing person or deceased victim may receive assistance in respect of a cleansing ceremony and to attend an exhumation procedure and 10 other relatives in the case of a hand-over ceremony. Paragraph "c" of Parts II A, E and F should be completed in respect of each relative.
- 6. Particulars about the assistance are contained in regulations 4, 4A, 4B, 5, 5A, 5B, 5C, 5E and 6 of the Regulations on Exhumation, Reburial or Symbolic Burial of Deceased Victims. A copy thereof is obtainable from the Office of the Fund Administrator at the Department of Justice and Constitutional Development.
- 7. The banking details of the person who is to receive money in terms of the Regulations, must be confirmed by the bank by affixing the official stamp of the bank on the form.

FORM OF ASSISTANCE REQUESTED (Please indicate with "x")

Travel and subsistence allowances for the purpose of attending the exhumation procedures relating to a missing person. Please complete Parts I, II A, III and
IV.
Legal or financial assistance for the purpose of an application for an order
presuming the death of a missing person. Please complete Parts I and II B.
Once-off grant for a reburial of a deceased victim. Please complete Part I, II C,
III and IV.
Once-off grant for a symbolic burial of a deceased victim. Please complete
Parts I, II D, III and IV.
Travel and subsistence allowances for the purpose of attending a cleansing
ceremony in respect of a deceased victim. Please complete Parts I, II E, III and
IV

Assistance to purchase an animal to be slaughtered for the purposes of a
cleansing ceremony in respect of a deceased victim. Please complete Parts I, II
F, III and IV.
Travel and subsistence allowances for the purpose of attending a hand-over
ceremony of a deceased victim. Please complete Parts I, II G, III and IV.

PART I PERSONAL PARTICULARS OF PERSON WHO REQUESTS ASSISTANCE AND PERSON WHO COUNTERSIGNS THIS FORM

PARTICULARS OF PERSON WHO REQUESTS ASSISTANCE			
1. Title:(Mr, Miss, Mrs, Dr)			
2. Surname:			
3. First Names:			
4. ID number/date of birth if ID number is not available:(Please attach a copy of your identity document/birth certificate)			
6. Are you a relative of the missing person or deceased victim?(Mark with "x")	Yes	No	
7.Relation to missing person or deceased victim:			
8. Contact details:	(State below the a	es/Home address of other per address where you live and to t have an address, state the e contacted, e.g. place of wo , etc)	which mail may be address of another
	(b) * Postal addre	ss/ Postal address of other pe	erson <i>(if applicable)</i> :
	(c) Numbers when	e you can be contacted:	

Home:	Work:	Cell
(d) Other		no:
	- I	······•
E-mail	Facsimi	le

В	PARTICULARS OF PERSON WHO COUNTERSIGNS THIS FORM				
	(The person countersigning this form may only do so if he or she is another relative of the missing person or			the missing person or	
	deceased victim who is over the age of 21 y	ears; or a person	over the age of 2	21 years wh	o knows the requester, if
	an	other relative is n	ot available.		
1. 7	itle:(Mr, Miss, Mrs, Dr)				
2. 8	Gurname:				
3. F	First Names:				
4. 1	D number/date of birth if ID number is not				
ava	ilable:(Please attach a copy of your identity				
doc	cument/birth certificate)				
6. <i>F</i>	Are you a relative of the missing person or	Yes		No	
dec	eased victim?(Mark with "x")	165		140	
7.R	elation to missing person or deceased victim:				100 mm (100 mm
8. 0	Contact details:	(a) Numbers w	here you can be	contacted:	
		Home:	Work:		Cell
					no:
		(b) Other	I verification of the second		
		E-mail		Facsimile	

PART II ASSISTANCE REQUESTED

Α	EX	HUMATION	
a.	PARTICULARS OF MISS	SING PERSON TO BE EXHUMED	
1. 5	Surname of person to be exhumed:		
2. F	Full names of person to be exhumed:		
3.	ID number/date of birth if ID number not		
ava	available of person to be exhumed: (Please		
atta	attach a copy of his/her identity document/birth		
cer	certificate)		
4. E	Date of exhumation:		
5. F	Place of exhumation:		
b.	TRANSPORT AND SUBSISTENCE ALLOW	ANCE FOR PERSON REQUESTING ASSISTANCE	

1. Full names of person requesting travel and			
subsistence allowance:			
2. Means of travel: (mark with "x")	Air transport	Public transport (taxi/bus)	Private transport
3. Date of travel:		Processing and the second seco	Fine control of the c
4. Time of travel:			
5. Travelling from:			
6. Travelling to:			
7. Total distance to be travelled:			
8.Subsistence allowance required for how many nights?			
9. Please give reasons why accommodation is			
to be hired for the nights referred to in 8 above:			
10. Banking details of person in whose bank	(a) Name of	Account holder:	
account the allowance is to be paid, if granted:			
	(b) Id numbe document)	r of account holder: (Please	attach copy of identity
(Bank in question must affix its stamp here to confirm the banking details of the centre)	(c) Name of t	oank:	
	(d) Branch co	ode:	
	(e) Type of a	ccount (e.g. cheque, saving	ps etc):
	(f) Account n	umber:	
(A recipient is a relative of a missing pers	on or decease	E ALLOWANCE FOR REC d victim who has been desi or deceased victim)	
1.	Title: (Mr, I	Miss, Mrs, Dr)	
Recipient nr 1	Recipie	nt nr 2	Recipient nr 3
2.	Sui	name:	
Recipient nr 1	Recipie	nt nr 2	Recipient nr 3
3.	Full	names	

Recipient nr 1	Recipient nr 2	Recipient nr 3
4.	ID number/date of birth if ID number	not available:
(Pleas	se attach a copy of your identity docume	ent/birth certificate):
Recipient nr 1	Recipient nr 2	Recipient nr 3
5.	Contact details:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
Home tel no.:	Home tel no.:	Home tel no.:
Work tel no.:	Work tel no.:	Work tel no.:
Cell no.:	Cell no.:	Cell no.:
E-mail address:	E-mail address:	E-mail address:
Facsimile:	Facsimile:	Facsimile:
6.	Date of travel:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
7.	Time of travel:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
8. Means	of travel (e.g air transport/public transp	port/private transport):
Recipient nr 1	Recipient nr 2	Recipient nr 3
9.	Travelling from:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
10.	Travelling to:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
11.	Total distance to be travell	ed:
Recipient nr 1	Recipient nr 2	Recipient nr 3
12. Su	bsistence allowance required for ho	w many nights?
Recipient nr 1	Recipient nr 2	Recipient nr 3
13. Please give reasons w	why accommodation is to be hired for	the nights referred to in 12 above:
Recipient nr 1	Recipient nr 2	Recipient nr 3

14.		Banking details:		
Recipient nr 1		Recipient nr 2	Recipient nr 3	
Name of A holder:	ccount	Name of Account holder:	Name of Account holder:	
Id number account he (Please at of identity document, Name of b Branch cool Type of accept cavings et	ank: count ue,	Id number of account holder: (Please attach copy of identity document) Name of bank: Branch code: Type of account (e.g. cheque, savings etc):	Id number of account holder: (Please attach copy of identity document) Name of bank: Branch code: Type of account (e.g. cheque, savings etc):	
Account no	umber:	Account number:	Account number:	
•	restion must affix its stamp Infirm the banking details of	Bank in question must affix its stamp here to confirm the banking details of the centre:	Bank in question must affix its stamp here to confirm the banking details of the centre:	

В	LEGAL OR FINANCIAL ASSISTANCE FOR TH	HE PURPOSE OF AN APPLICATION FOR AN ORDER	
	PRESUMING THE DEA	ATH OF A MISSING PERSON	
D	ISAPPEARING AND MISSING AND WHO IS BELIEVI	O THE TRUTH AND RECONCILIATION COMMISSION AS ED TO HAVE DISAPPEARED OR WHO WENT MISSING 1994 AS A RESULT OF THE CONFLICTS OF THE PAST.	
1. Div	vision of High Court in which it is intended to bring an		
appli	application for an order presuming the death of the person		
repor	ted missing		
2. Su	rname of missing person:		
3. Fu	II names of missing person:		
4. ID	number/date of birth if ID number is not available of		
missi	ing person: (Please attach copy of identity document)		
5. Da	ate/approximate date person went missing:		

gone missing (if known:) 7. State the circumstances under which the person went missing: 8. Give reasons why it is believed that the person went missing as a result of the conflicts of the past: 9. Banking details of person in whose bank account the financial assistance is to be paid, if granted: (If financial assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (d) Branch code: (e) Type of account (e.g. cheque, savings etc): (f) Account number:	6. Place where person went missing/is believed to have	
missing: 8. Give reasons why it is believed that the person went missing as a result of the conflicts of the past: 9. Banking details of person in whose bank account the financial assistance is to be paid, if granted: (If financial assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	gone missing (if known:)	
8. Give reasons why it is believed that the person went missing as a result of the conflicts of the past: 9. Banking details of person in whose bank account the financial assistance is to be paid, if granted: (If financial assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	7. State the circumstances under which the person went	
9. Banking details of person in whose bank account the financial assistance is to be paid, if granted: (If financial assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (a) Name of Account holder: (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	missing:	
9. Banking details of person in whose bank account the financial assistance is to be paid, if granted: (If financial assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	8. Give reasons why it is believed that the person went	
financial assistance is to be paid, if granted: (If financial assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	missing as a result of the conflicts of the past:	
assistance in respect of the application is provided, it shall be paid directly into the bank account of the person, who rendered the legal assistance): (b) Id number of account holder: (Please attach copy of identity document) (c) Name of bank: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	9. Banking details of person in whose bank account the	(a) Name of Account holder:
shall be paid directly into the bank account of the person, who rendered the legal assistance): (c) Name of bank: (d) Branch code: (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	financial assistance is to be paid, if granted: (If financial	
who rendered the legal assistance): (c) Name of bank: (Bank in question must affix its stamp here to confirm the banking details of the centre) (d) Branch code: (e) Type of account (e.g. cheque, savings etc):		(b) Id number of account holder: (Please attach copy of
(c) Name of bank: (Bank in question must affix its stamp here to confirm the banking details of the centre) (d) Branch code: (e) Type of account (e.g. cheque, savings etc):		identity document)
(Bank in question must affix its stamp here to confirm the banking details of the centre) (d) Branch code: (e) Type of account (e.g. cheque, savings etc):	who rendered the legal assistance):	
here to confirm the banking details of the centre) (e) Type of account (e.g. cheque, savings etc):		(c) Name of bank:
here to confirm the banking details of the centre) (e) Type of account (e.g. cheque, savings etc):		
to confirm the banking details of the centre) (e) Type of account (e.g. cheque, savings etc):	1 · · · · · · · · · · · · · · · · · · ·	(d) Branch code:
(e) Type of account (e.g. crieque, savings etc).	1,10.0	
(f) Account number:	centre)	(e) Type of account (e.g. cheque, savings etc):
(f) Account number:		
		(f) Account number:

C ONCE-OFF GRANT FOR TH	ONCE-OFF GRANT FOR THE REBURIAL OF A DECEASED VICTIM		
Surname of deceased victim to be reburied:			
2. Full names of deceased victim to be reburied:			
3. ID number/date of birth if ID number is not available deceased victim: (Please attach copy of identificate)			
4. Date on which deceased victim is to be/was re-buried:			
5. Banking details of person in whose bank account the	(a) Name of Account holder:		
once off grant is to be paid, if granted:			
	(b) Id number of account holder: (Please attach copy of		
	identity document)		
(Dank in avantian must office its storms			
(Bank in question must affix its stamp here	(c) Name of bank:		
to confirm the banking details of the centre)			
ounicy	(d) Branch code:		

(e) Type of account (e.g. cheque, savings etc):
(f) Account number:

D ONCE-OFF GRANT FOR THE SYMI	BOLIC BURIAL OF A DECEASED VICTIM
Surname of deceased victim to be symbolically buried:	
2. Full names of deceased victim to be symbolically	
buried:	
3. ID number/date of birth if ID number is not available of	
deceased victim: (Please attach copy of identity	
document/birth certificate)	
4. Date on which deceased victim is to be/was	
symbolically buried:	
4. Banking details of person in whose bank account the	(a) Name of Account holder:
once off grant is to be paid, if granted:	
	(b) Id number of account holder: (Please attach copy of identity document)
	(c) Name of bank:
(Bank in question must affix its stamp here to confirm the banking details of the	(d) Branch code:
centre)	(e) Type of account (e.g. cheque, savings etc):
	(f) Account number:

Е	TRAVEL AND SUBSISTENCE ALLOWAND	CES FOR THE PURPOSE OF ATTENDING A CLEANSING
	CEREMONY IN RE	SPECT OF A DECEASED VICTIM
a.	PARTICULA	RS OF DECEASED VICTIM
	urname of deceased victim in respect of which mony is to be conducted:	
	Ill names of deceased victim in respect of which mony is to be conducted:	
3. IE	O number/date of birth if ID number is not	

1.

(A recipient is a relative of a deceased victim who has been designated by other relatives of the deceased victim) Title: (Mr, Miss, Mrs, Dr)

Recipient nr 1	Recipient nr 2	Recipient nr 3
2.	Surname:	
		Davidad and G
Recipient nr 1	Recipient nr 2	Recipient nr 3
3.	Full names	
Recipient nr 1	Recipient nr 2	Recipient nr 3
4. ID num	। ber or date of birth if ID number ।	not available:
(Please atta	nch a copy of your identity documer	nt/birth certificate):
Recipient nr 1	Recipient nr 2	Recipient nr 3
5.	Contact details:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
Home tel no.:	Home tel no.:	Home tel no.:
Work tel no.:	Work tel no.:	Work tel no.:
Cell no.:	Cell no.:	Cell no.:
E-mail address:	E-mail address:	E-mail address:
Facsimile:	Facsimile:	Facsimile:
6.	Date of travel:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
7.	Time of travel:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
	vel (e.g air transport/public transpo Recipient nr 2	Recipient nr 3
Recipient nr 1	Recipient nr 2	necipient iii 3
9.	Travelling from:	
Recipient nr 1	Recipient nr 2	Recipient nr 3
10.	Travelling to:	William Control of the Control of th
Recipient nr 1	Recipient nr 2	Recipient nr 3
11.	Total distance to be travelled	d:
Recipient nr 1	Recipient nr 2	Recipient nr 3
10.000		
	ence allowance required for how	-
Recipient nr 1	Recipient nr 2	Recipient nr 3

Recipient	t nr 1	Recipient nr 2	Recipient nr 3
14.		Banking details:	
Recipient	t nr 1	Recipient nr 2	Recipient nr 3
Name of Account holder:		Name of Account holder:	Name of Account holder:
Id number of account holder: (Please attach copy of identity document)		Id number of account holder: (Please attach copy of identity document)	Id number of account holder: (Please attach copy of identity document)
Name of bank:		Name of bank:	Name of bank:
Branch code:		Branch code:	Branch code:
Type of account (e.g. cheque, savings etc):		Type of account (e.g. cheque, savings etc):	Type of account (e.g. cheque, savings etc):
Account number:		Account number:	Account number:
Bank in question must a to confirm the banking of centre:		Bank in question must affix its stamp here to confirm the bank details of the centre:	Bank in question must affix its stamp here to confirm the banking details of the centre:

F	ASSISTANCE TO PURCHASE ANIMAL FOR THE	PURPOSE OF A CLEANSING CEREMONY IN RESPECT
	OF A DEC	CEASED VICTIM
	Surname of deceased victim in respect of whom nsing ceremony is to be/was performed:	
	rull names of deceased victim in respect of whom nsing ceremony is to be/was performed:	
3. ID	number/date of birth if ID number is not available of	

deceased victim in respect of whom cleansing ceremony	
is to be/was performed: (Please attach copy of identity	
document/birth certificate)	
4. Date on which cleansing ceremony in respect of the	
deceased victim is to be/was performed:	
4. Banking details of person in whose bank account the	(a) Name of Account holder:
money to purchase the animal is to be paid, if granted:	
	(b) Id number of account holder: (Please attach copy of
	identity document)
	(c) Name of bank:
(Bank in question must affix its stamp	(d) Branch code:
to confirm the banking details of the	
centre)	(e) Type of account (e.g. cheque, savings etc):
	(f) Account number:

G	TRAVEL AND SUBSISTENCE ALLO	WANCES FOR T	HE PURPOSE OF ATTENDI	NG A HAND-OVER
		CEREMO	NY	
a.	PART	ICULARS OF DE	CEASED VICTIM	
1. Surnam	e of deceased victim:			
2. Full nam	nes of deceased victim:			
3. ID num	ber/date of birth if ID number is not			
available o	f deceased victim: (Please attach copy			
of identity	document/birth certificate)			
4. Date of	hand-over:			
5. Place of	hand-over:			
b.	TRANSPORT AND SUBSISTENCE ATTENDING A HAND-OVE		R PERSON REQUESTING A RESPECT OF A DECEASE	
1. Full na	mes of person requesting travel and			
subsistence allowance:				
2. Means	of travel (mark with "x"):	Air transport	Public transport (e.g taxi/bus)	Private transport
2. Date of	travel:			•
3. Time of	travel:			

4. Travelling from:					
5. Travelling to:					
6. Total distance to be travelled:					
7.Subsistence allowance required for how mainights?	ny				
8. Please give reasons why accommodation is be hired for the nights referred to in 7 above:	to				
9. Banking details of person in whose bank account the allowance is to be paid, if granted:	(a) Name of A	Account holder:			
	(b) Id number document)	of account holder	: (Please atta	ach copy	of identity
(Bank in question must affix its stamp here	(c) Name of b	ank:			
to confirm the banking details of the centre)	(d) Branch co	de:			
	(e) Type of ac	ccount (e.g. chequ	e, savings et	c):	
	(f) Account nu	umber:			
			o proues	TINO 404	NOTANOE
c. TRANSPORT AND SUBSISTEN					
(A recipient is a relative of a missing			_		
of the missing person or deceased complete this section in res					
1. Title: (Mr, Miss, Mrs, Dr)	Tool or odorr room	ioni wiio wiii alion	a tiro nana o		
2. Surname					
3. Full names;				-	
4. ID number/date of birth if ID number is not available: (Please attach a copy of your identity document/birth certificate)					
6. Contact details:	Home tel	Work tel		Cell	
	no: E-mail:	no:	Facsimile:	no:	
7. Date of travel:	E-man.		r addirme.	l	
8. Time of travel:					
9. Travelling from:					
10. Travelling to:					
11. Total distance to be travelled:					
11.Subsistence allowance required for how many nights?					
12. Please give reasons why accommodation					

is to be hired for the nights referred to in 6 above:		
13. Banking details of the centre in whose bank account the money is to be paid:		(a) Name of Account holder:
		(b) Id number of account holder: (Please attach copy of identity document)
	(Bank in question must affix its stamp here to confirm the banking details of the centre)	(c) Name of bank:
		(d) Branch code:
		(e) Type of account (e.g. cheque, savings etc):
		(f) Account number:

PART III

OAT	TH/AFFIRMATION AND SIGNATURE OF THE PERSON REQUESTING ASSISTANCE
Ι, .	(full names),
ident	ity number:, being the requester, acknowledge that I—
(a)	have consulted with the other relatives of the * missing person/deceased victim; and
(b)	have been designated by the other relatives of the *missing person/deceased victim
	to be the requester.
Sign	ed at
REQ	UESTER
The	requester has *taken the oath/solemnly affirmed that the contents of the declaration are
comp	plete and true, before me atday
of	20
COM	IMISSIONER OF OATHS
(* De	elete whichever is not applicable.)

PART IV

OATH/AFFIRMATION AND SIGNATURE OF THE PERSON COUNTERSIGNING THE REQUEST FORM

I,(full names)
identity number:, being the person who is countersigning
this request form, acknowledge that I—
(a) *am a relative of the *missing person/deceased victim and I am over the age of 21
years;
(b) a person over the age of 21 years who knows the requester.
Signed at on thisday of
PERSON COUNTERSIGNING THE REQUEST FORM
The person countersigning the request form has *taken the oath/solemnly affirmed that the
contents of the declaration are complete and true, before me at or
this20
COMMISSIONER OF OATHS
(* Delete whichever is not applicable)" "

Short title

18. These Regulations are called the Exhumation, Reburial or Symbolic Burial of Deceased Victims Amendment Regulations.