FORM 1

OBJECTION TO THE PROCESSING OF PERSONAL INFORMATION IN TERMS OF SECTION 11(3) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018

[Regulation 2]

Note:

- 1. Affidavits or other documentary evidence as applicable in support of the objection may be attached.
- 2. If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.
- 3. Complete as is applicable.

Signature of data subject/designated person

Α	DETAILS OF DATA SUBJECT
Name(s) and	
surname/ registered	
name of data subject:	
Unique Identifier/	
Identity Number	
Residential, postal or	
business address:	
	Code ()
	Code()
Contact number(s):	
Faxnumber/E-mail	
address:	
В	DETAILS OF RESPONSIBLE PARTY
	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname/	
Registered name of	
responsible party:	
Residential, postal or	
business address:	
busiliess address.	
	Code (
Contact number(s):	
Fax number/ E-mail	
address:	
С	REASONS FOR OBJECTION IN TERMS OF SECTION 11(1)(d) to (f) (Please provide detailed reasons for the objection)
Signed at	this day of20

REQUEST FOR CORRECTION OR DELETION OF PERSONAL INFORMATION OR DESTROYING OR DELETIONOFRECORDOFPERSONALINFORMATIONINTERMS OF SECTION 24(1) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018 [Regulation 3]

Note:

- 1. Affidavits or other documentary evidence as applicable in support of the request may be attached.
- 2. If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.
- 3. Complete as is applicable.

Mark the appropriate box with an "x".

Request for:	
Correction or deletion of the pers	onal information about the data subject which is in
possession or under the control of	f the responsible party.
·	
Destroying or deletion of a record of	of personal information about the data subject which
	trol of the responsible party and who is no longer
authorised to retain the record of	
dutionsed to retain the record of	
Α	DETAILS OF THE DATA SUBJECT
Name(s) and surname / registered name of data	52174126 01 1112 57477 00551201
subject:	
Unique identifier/ Identity Number:	
, ,	
Residential, postal or business address:	
	Code (
Contrat acceptants	, , , , , , , , , , , , , , , , , , ,
Contact number(s):	
Fax number/E-mail address:	
В	DETAILS OF RESPONSIBLE PARTY
Name(s)andsurname/ registered name of	
responsible party:	
Residential, postal or business address:	
	Code (
Contact number(s):	
Fax number/ E-mail	
address: C INFORMATION TO B	SE CORRECTED/DELETED/ DESTRUCTED/ DESTROYED
C INFORMATION TO E	DE CORRECTED/ DESTROCTED/ DESTROTED

D	REASONS FOR *CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT INTERMS OF SECTION 24(1)(a) WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY; and or REASONS FOR *DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(b) WHICH THE RESPONSIBLE PARTY IS NO LONGER AUTHORISED TO RETAIN. (Please provide detailed reasons for the request)
Signed at	this day of20
Signature of data sub	oject/ designated person