

Form 2:

Cellphone number

Fax number / E-mail address

Request for correction or deletion of personal information or destroying or deletion of record of personal information in terms of Section 24(1) of the protection of personal information act, 2013 (Act no.4 of 2013)

Regulations relating to th	e protection of	personal information,	2018 (Regulation 3)

Note:																												
 Affidavits or other documentary of the space provided for in this Formation. Complete as is applicable. 																	d sig	n ea	ich p	age	ì.							
Mark the appropriate box wi	th a	n "x	.".																									
Request for:																												
Correction or deletion of the per	sonal i	inforr	nati	on al	bout	the	data	sub	ject	whic	ch is	in po	osses	ssio	n or ı	ınde	r the	con	trol	of th	ne re	spon	sible	e par	ty.			
Destroying or deletion of a recor and who is no longer authorised									data	subj	ect v	vhicl	n is ii	n po	sses	sion	or un	nder	the	con ⁻	trol c	of the	e res	pons	ible	part	У	
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Fax number / E-mail address																												
Section B: Details of responsi	ible p	part	y																									
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Telephone

Section C: Information to be corrected / deleted / destructed / destroyed								
Section D: Reasons for *correction or deletion of the personal information about the data subject in terms 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 rec	uest							
Signed at		1						
Signature of data subject/ designated person		Date DD - MM - 20 YY						