

FORM 2: REQUEST FOR CORRECTION OR DELETION OF PERSONAL INFORMATION

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 THE PROTECTION OF PERSONAL INFORMATION, 2018

[Regulation 3]

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.

Reference Number: _____

Mark the appropriate box with an "x".

Request for:

Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.

Destroying or deletion of a record of personal information about the data subject which is in possession or under the control of the responsible party and who is no longer authorised to retain the record of information.

A	DETAILS OF DATA SUBJECT
Name and surname of data subject:	
Unique Identifier/ Identity Number:	
Residential, postal or business address:	
Contact number(s):	

Fax number:	
E-mail address:	

B	DETAILS OF RESPONSIBLE PARTY
Name and surname of responsible party(if the responsible party is a natural):	
Residential, postal or business address:	
Contact number(s):	
Fax number:	
E-mail address:	
Name of public or private body(if the responsible party is not a natural person):	
Business address:	
Contact number(s):	
Fax number:	
E-mail address:	

C	REASONS FOR *CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT/*DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY (Please provide detailed reasons for the request)

Signed at _____ this ____ day of _____ 20____.

Signature of data subject (applicant) / designated person