FORM 2 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, 2017 [Regulation 3(2)] NOTE:

- 1. Affidavits or other documentary evidence in support of the request must 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 authorized to retain the record of information.

A. DETAILS OF DAT	A SUBJECT			
Name and surname of				
data subject:				
Residential, postal or				
business address:				
	Code:			
Contact number(s):				
Email address:				
B DETAILS OF RES	PONSIBLE PARTY			
Name and Surname of				
responsible party (if				
responsible party is a				
natural):				
Residential, postal or business address:				
business address.				
	Code:			
Contact number(s):				
Email address:				
Name of public or				
private body(if the				
responsible party is not a				
natural person): Business address:				
Dusiness address.				
Contact number(s)				
Email address				
	CORRECTION OR DELETION OF THE PERSONAL INFORMATION			
	ATA SUBJECT/DESTRUCTION OR DELETION OF A RECORD OF			
	RMATION ABOUT THE DATA SUBJECT WHICH IS IN POSSESSION OR			
	ITROL OF THE RESPONSIBLE PARTY (Please provide detail reasons for the			
request. Another sheet may be annexed if the space is insufficient)				

• Delete whichever is not applicable

Signed at20

Signature of data subject (applicant)