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. 2.	Affidavits or other documentary evidence in support of the request must be attached. 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 1	he appropriate box with an "x".
Requ	est 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 longerauthorised to retain the record of information.

A	DETAILS OF THE DATA SUBJECT		
Surname:			
Full names:			
Identity number:			
Residential, postal or business address:		Code ()
Contact number(s):			
Fax number:			
E-mail address:			
В	DETAILS OF RESPONSIBLE PARTY		
Name and surname of responsible party (if the responsible party is a natural person):			
Residential, postal or business address:		Code (1
Contact number(s):		0000 (
Fax number:			
E-mail address			

Name of public or private body (if the responsible party is not a natural person):		
Business address:	Code (_
Contact number(s):		
Fax number:		
E-mail address:		
C DATA SUBJECT	*CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE TI*DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ATA SUBJECT WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE SPONSIBLE PARTY. (Please provide detailed reasons for the request)	
* Delete which	ever is not applicable	
Signed at	day of20	
Signature of Data s	subject	