

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.*

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.

☐

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 and who is no longer authorised 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:	

B	DETAILS OF RESPONSIBLE PARTY
Name and surname of the responsible party:	
Residential, postal or business address:	
	Code ()
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:	
	Code ()
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)

* *Delete whichever is not applicable*

Signed at this day of20.....

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Signature of Data subject