

REQUEST FOR DATA PORTABILITY

Note:

- i. Documentary evidence in support of the objection may be required.
- ii. Where the space provided for in this Form is inadequate, submit information as an Annexure
- iii. All fields marked as * are mandatory

A. DETAILS OF THE DATA SUBJECT

(This section is to provide the details of the Data Subject).

Name: _____

Identity Number: _____

Phone number: _____

Email address: _____

(Provide the following details where making a request on behalf of a minor or a person who has no capacity)

Name: _____

Relationship with the Data Subject: _____

Contact Information: _____

B. DETAILS OF THE REQUEST

Please transfer a copy of my personal data to: _____

By either:

Emailing a copy to them at: _____

Mailing to: _____

Others (Please specify): _____

C. DECLARATION

Note, any attempt to port personal data through misrepresentation may result in prosecution.

☐

I confirm that I have read and understood the terms of this request form and certify that the information given in this application is true.

Signature

Date