

CONFIDENTIAL

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) and Regulation 3 of the Regulations Relating to the Protection of Personal Information, 2018

Important Completion Notes:

1. Please attach adequate proof of identity to this form;
2. Affidavits or other documentary evidence as applicable in support of the objection may be attached.
3. If the space provided for in this Form is inadequate, submit information as an Annexure to this Form and sign each page.
4. Complete as is applicable.

Request for (mark relevant box with an "X")

	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
1. Name(s) and surname/ registered name of data subject	
2. Unique Identifier/Identity	

FORM 2 - REQUEST FOR CORRECTION, DELETION, OR DESTRUCTION

Number/Matter number	
3. Residential, postal or business address	
4. Contact number(s)	
5. Email address:	
B.	DETAILS OF RESPONSIBLE PARTY
6. Registered name of responsible party	The PJD Law Firm
7. Residential, postal or business address:	7 Potgieter Road, Eastleigh, Edenvale, Gauteng
8. Contact number(s):	082 847 849 8 - 074 682 689 4
9. Email address:	IO@PJDlegal.com
C.	INFORMATION TO BE CORRECTED/DELETED/DESTRUCTED/DESTROYED (Please provide detailed description of the relevant information)

D.	<p>REASONS FOR CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24 (1) (a) WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY;</p> <p>and or</p> <p>REASONS FOR DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24 (1) (b) WHICH THE RESPONSIBLE PARTY IS NO LONGER AUTHORISED TO RETAIN</p> <p><i>(Please provide detailed reasons for the request)</i></p>
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By Data Subject.					
	Name of signatory	Capacity	Date	Location	Signature