

REQUEST FOR ACCESS TO RECORD OF A PRIVATE BODY

Dear Requester,

Data Protection Officer

This is a copy of your personal information access request you recently made with our organisation.

Particulars of the Responsible Party from whom you are requesting access:

Biznify (Pty) Ltd

42 Kingfisher Avenue

Helikonpark

1759

South Africa

Telephone: +27 64 903 1409

Details of the right/s you wish to exercise:

Individuals have the right to request access to information about them that we hold. They also have the right to object to processing of personal information that is likely to cause, or is causing, damage or distress, the right to prevent processing for the purpose of direct marketing, the right to object to decisions being taken by automated means and, in certain circumstances, have inaccurate personal information rectified, blocked, erased or destroyed. They also have the right to lodge a complaint with a Regulator

Access (Form C)

If you want to more than just confirm whether or not we hold your personal information, it will help us process your request more easily if you are able to provide additional information below such as:



Full particulars of the record to which access is requested, including the reference number if that is known to you

If you qualify for exemption of the payment of any fee in respect of your request, please state the reason for exemption

If the record is in written or printed form, whether you want a copy of the record or wish to inspect the record If the record consists of visual images, whether you want to view the images, a copy of the images or a transcription of the images

If the record is held on computer or in an electronic or machine-readable form, whether you want a printed copy of the record, a printed copy of information derived from the record or a copy in computer-readable form

If the record consists of recorded words or information which can be reproduced in sound, whether you want to listen to the soundtrack or want a transcription of the soundtrack

If you requested a copy or transcription of a record, indicate if you wish the copy or transcription to be posted to you and also note that postage will be payable. Indicate whether a disability requires you to access the record in some other format.

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Objection (Form 1)

In terms of Section 11(1), (d to f) of the Protection of Personal Information Act, I would
like to raise an objection to the processing of my personal information. Please find all
the necessary details below.
Correction (Form 2)
I would like to make corrections to or delete certain of my personal information which is
in your possession or under your control. Please find below, details of the personal
information that must be corrected or deleted as well as the reasons why this request is
being made.



Deletion (Form 2)



Telephone
Fax number
Particulars of the person on whose behalf the request is made
This section must be completed ONLY if a request is being made on behalf of another person.
First name
Last name
Describe briefly, why you are making the request on the person's behalf. Do not include
sensitive information.



Person's relationship with our organisation

Customers / Clients	
Employees	
Consultants	
Trainees/Incubator programme	
Service Providers	
Other	

Specify Other	
Specify Office	

Our response to your request

How would you prefer our response and any information to be presented to you?

Orally In writing Via email Other Specify other

Orally	
In writing	
Via email	
Other	

Specify other	

Fees

Depending on the type of request and the number of records requested, we may charge certain fees to service the request. Please contact us directly should you have any query with regards to fees. Where requests from a data subject are manifestly unfounded or excessive, in particular because of their repetitive character, the Responsible Party may either charge a reasonable fee taking into account the administrative costs of providing



the information or communication or taking the action requested; or refuse to act on the request. The Responsible Party shall bear the burden of demonstrating the manifestly unfounded or excessive character of the request.

Signed at
This day, month, year
Signature of the Requester
Email this form to info@biznifv.co.za