

ANNEXURE A: PERSONAL INFORMATION REQUEST FORM

PERSONAL INFORMATION REQUEST FORM

Please submit the completed form to the Information Officer:

Name & Surname	Nathan Smith
Contact Number	0218682210
E-Mail	popi@hgmolenaar.com

Please be aware that we may require you to provide proof of identification prior to processing your request.

There may also be a reasonable charge for providing copies of the information requested.

A. Particulars of Data Subject

Name & Surname	
Identity Number	
Postal Address	
Contact Number	
Email Address	

B. Request

I request the organisation to:

- (a) Inform me whether it holds any of my personal information
- (b) Provide me with a record or description of my personal information
- (c) Correct or update my personal information
- (d) Destroy or delete a record of my personal information

C. Instructions

D. Signature Page

Signature :

Date :