FORM: DATA PORTABILITY

REQUEST FOR DATA PORTABILITY RELATING TO PROCESSING OF PERSONAL INFORMATION IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

Note:

- 1. Affidavits or other documentary evidence as applicable in support of the request to port the data may 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.
- 3. Complete as is applicable.

Α	DETAILS OF DATA SUBJECT
Name(s) and surname	
/ registered name of	
data subject:	
Unique Identifier /	
Identity Number:	
Residential, postal or business address:	
business address:	
	Code ()
Contact number(s):	,
Fax number / E-mail	
address:	
В	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname	
/ Registered name of	
responsible party:	
Residential, postal or	
business address:	
	Code ()
Contact number(s):	
Fax number / E-mail	
address:	
C1	REQUEST OF DATA PORTABILITY
	ereby requests that the information as described in C2 below is transferred to the partyby the Responsible Party
C2	DATA PORTABILITY / DATA TO BE TRANSFERRED: INFORMATION DESCRIPTION

C3	DETAILS OF PARTY TO RECEIVE DATA
Name(s) and surname / Registered name of	
responsible party:	
Residential, postal or	
business address:	
	Code ()
Contact number(s):	·
Fax number / E-mail	
address:	
Signed at	
Signature of data subject	ct / designated person