

FORM 1

**OBJECTION TO THE PROCESSING OF PERSONAL INFORMATION IN
TERMS OF SECTION 11(3) OF THE PROTECTION OF PERSONAL
INFORMATION ACT, 2013 (ACT NO.
4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL
INFORMATION, 2017**
[Regulation 2(1)]

Note:

1. *Affidavits or other documentary evidence in support of the objection must 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.*

Reference Number....

| A | DETAILS OF DATA SUBJECT | |
|--|---|--|
| Name and surname of data subject: | | |
| Residential, postal or business address: | | |
| | | |
| | Code () | |
| Contact number(s): | | |
| Fax number: | | |
| E-mail address: | | |
| B | DETAILS OF RESPONSIBLE PARTY | |
| Name and surname of responsible party (if the responsible party is a natural): | The Information Officer Aurum Institute Mrs J Paterson | |
| Residential, postal or business address: | 29 Queens Road | |
| | Parktown | |
| | Johannesburg | |
| | Code (2193) | |
| Contact number(s): | tel:+2710590 300 0834191168 | |
| Fax number: | | |
| E-mail address: | POPIA@auruminstitute.org | |

| | |
|--|--|
| Name of public or private body (if the responsible party is not a natural person): | |
| Business address: | |
| | |
| | Code () |
| Contact number(s): | |
| Fax number: | |
| E-mail address: | |
| C | REASONS FOR OBJECTION (Please provide detailed reasons for the objection) |
| | |

Signed at this day of20.....

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Signature of data subject (applicant)