**CONTACT NUMBER(S):** 

**FAX NUMBER / E-MAIL ADDRESS:** 

## 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

TO: THE INFORMATION OFFICER OF TRAZE (P	TY) LTD
CONTACT DETAILS:	EMAIL:
A. DETAILS OF DATA SUBJECT	
NOTES:	
<ul> <li>Accompanying documentation such as At applicable in support of the objection shows</li> </ul>	fidavits or other documentary evidence as uld be attached.
Submit additional annexures to this form a the space provided for in this Form is inade	accompanied with a signature on each page It equate.
• Form to be completed as is applicable.	
NAME(S) AND SURNAME / REGISTERED NAME OF DATA SUBJECT:	
UNIQUE IDENTIFIER / IDENTITY NUMBER	
PASSPORT NUMBER:	
RESIDENTIAL, POSTAL OR BUSINESS ADDRESS:	Postal Code:

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## **B. DETAILS OF RESPONSIBLE PARTY**

NAME(S) AND SURNAME/REGISTERED NAME NAME OF RESPONSIBLE PARTY:	
RESIDENTIAL, POSTAL OR BUSINESS ADDRESS:	Postal Code:
CONTACT NUMBER(S):	
FAX NUMBER / E-MAIL ADDRESS:	
C. REASONS FOR OBJECTION IN TERMS (Please provide detailed reasons for th	