

## **REQUEST FOR DATA PORTABILITY**

### *Note*

- i) Documentary evidence in support of this request may be required.*
- ii) Where the space provided for in this Form is inadequate, submit information as an annexure.*
- iii) All fields marked as \* are mandatory.*

### **A. DETAILS OF THE DATA SUBJECT**

*(This section is to provide the details of the Data Subject).*

Name\*

Identity Number\*

Phone Number\*

E-mail Address\*

*(Provide the following details where making a request on behalf of a minor or a person who has no capacity)*

Name\*

Relationship with the Data Subject\*

Contact Information\*

### **B. DETAILS OF THE REQUEST**

Please transfer a copy of my personal data to\*

By either:

- Emailing a copy to them at
- Mailing to
- Others (Please specify)

### **C. DECLARATION**

Note, any attempt to port personal data through misrepresentation may result in prosecution.

I certify that the information given in this application is accurate to the best of my knowledge.

Signature:

Date: