

## HAZCHEMWIZE (PTY) LTD

Registration Number: 2002/020331/07

# APPLICATION FORM FOR AUTHORISATION TO PROCESS PERSONAL INFORMATION OF CHILDREN

**NOTE:** The personal information submitted herein shall be solely used for specific purposes of authorisation applications submitted to the Information Regulator ("Regulator") in terms of section 35(2) of the Protection of Personal Information Act 04 of 2013 (POPIA).

**NOTE:** All the information submitted herein shall be used for the purpose stated above, as mandated by POPIA. This Information may be disclosed to the public. The Regulator undertakes to secure the integrity and confidentiality of personal information in its possession or under its control by taking appropriate, reasonable technical and organisational measures to prevent loss of, damage to or unauthorised destruction of personal information and unlawful access to or processing of personal information of children.

Part A	DETAILS OF RESPONSIBLE PARTY
Type of Body:	Private Body
Registered Name of Body:	Hazchemwize (Pty) Ltd
Trading Name of Body:	Hazchemwize (Pty) Ltd
Information Officer Name:	Marce' Clare Joan Maneveldt
Information Officer Registration #:	2024-003864
Postal Address:	P.O. Box 10122 Edleen 1619
Physical Address:	10 Zurich Road Spartan Kempton Park 1620
Telephone:	(011) 975-1278
Cell:	0823348870
E-mail address:	marcem@hazchemwize.co.za
Website:	www.hazchemwize.co.za

Part B	PROCESSING OF PERSONAL INFORMATION OF CHILDREN
Please specify description of the categories of personal information of children or categories of information relating thereto, which the responsible party intends to process.	
Please explain how the processing of the specified personal information of children is in the public interest.	
Is the processing of the personal information of children in compliance with the eight conditions for lawful processing of personal information?  If no, please confirm if an exemption, in terms of section 37 of POPIA, has been granted by the Regulator.	
Please indicate if the responsible party in the Republic intends to transfer personal information of children to a third party who is in a foreign country?  If so, please specify the name of the foreign country.	
Please specify the appropriate security measures to be implemented by the responsible party to ensure appropriate protection of the personal information of the children.	

INFORMATION OFFICER

PART C - DECLARATION

I declare that the information contained herein is true, correct and accurate.

Signed at \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_

LOCATIONDAYMONTHYEAR

Signature \_\_\_\_\_ Signed by \_\_\_\_\_

OF INFORMATION OFFICERNAME OF INFORMATION OFFICER

Part D	STATISTICS
Name of Industry or Sector:	Education
Type of Profession:	Other: Service Industry