



REPUBLIC OF SOUTH AFRICA

**HAZCHEMWIZE (PTY) LTD**

Registration Number: 2002/020331/07

**FORM 2 PART I**

**REQUEST FOR:**

**DELETION OF PERSONAL INFORMATION**

**IN TERMS OF SECTION 24(1) OF**

**THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018 [Regulation 3]**

**Note:**

1. Affidavits or other documentary evidence as applicable in support of the request 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.

**Request For:**

Mark the appropriate box with an "x".



**Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.**  
(See Section C below)



**Destroying or deletion OF A RECORD of personal information about the data subject which is in possession or under the control of the responsible party and who is no longer authorised to retain the record of information.**

A	DETAILS OF THE DATA SUBJECT
Registered Name(s) and Surname:	
Unique Identifier / Identity Number:	
Residential, Postal or Business Address:	
Contact number(s):	
E-mail address:	
B	DETAILS OF RESPONSIBLE PARTY
Registered Name of Responsible Party:	Hazchemwize (Pty) Ltd
Residential, Postal or Business Address:	10 Zurich Road , Spartan , Kempton Park , 1620
Contact number(s):	(011) 975-1278
E-mail address:	marcem@hazchemwize.co.za
C	INFORMATION TO BE CORRECTED / DELETED

DATA SUBJECT

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

LOCATION DAY MONTH YEAR

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

OF DATA SUBJECT NAME OF DATA SUBJECT

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RESPONSIBLE PERSON ON BEHALF OF Hazchemwize (Pty) Ltd

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

LOCATION DAY MONTH YEAR

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

OF RESPONSIBLE PERSON NAME OF RESPONSIBLE PERSON

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