


Document Title	Request for Correction or Deletion of Personal Information	
Document Type	Form & Template	
Document No:	GTICS-PRIV-FT-003	
Version No:	1	
Author:	GTICS	
Effective Date:	01/02/2026	
Next Revision Date:	01/02/2031	

**REQUEST FOR CORRECTION OR DELETION OF PERSONAL INFORMATION OR
DESTROYING OR DELETION OF RECORD 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, 2017

[Regulation 3(2)]

Note:

1. *Affidavits or other documentary evidence in support of the request 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: _____


Mark the appropriate box with an "x".

Request for:


- | | |
|--------------------------|---|
| <input type="checkbox"/> | Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party. |
| <input type="checkbox"/> | 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. |

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A	DETAILS OF THE DATA SUBJECT
Surname:	
Full names:	
Identity number:	
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	
Residential, postal or business address:	
	Code ()
Contact number(s):	
Fax number:	
E-mail address:	
Name of public or private body (if the responsible party is not a natural person):	
Business address:	
	Code ()

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Contact number(s): Fax number: E-mail address:	
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C	REASONS FOR *CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT/*DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT WHICH IS IN POSSESSION OR UNDER THE

**Delete whichever is not applicable*

Signed at this day of20.....

.....

Signature of data subject