

CORRECTION OR DELETION OF PERSONAL RECORDS FORM

Att: The Deputy Information Officer
compliance@safireinsurance.com

1. PARTICULARS OF REQUEST

Please indicate your preferred form of amendment to the record by marking the appropriate box with an 'X':

1. Please indicate the type of request by placing an x in the appropriate block:

☐

Correction or deletion of a record

☐

Destruction or deletion of a record

2. PARTICULARS OF REQUESTOR

Full names and surname:

ID no:

Tel no:

E-mail address:

Physical address:

Postal address:

3. PARTICULARS OF PERSON ON WHOSE BEHALF REQUEST IS MADE

This section must be completed only if a request for information is made on behalf of another person.

Full names and surname:

ID no:

Tel no:

E-mail address:

Physical address:

Postal address:

4. INFORMATION TO BE CORRECTED / DELETED / DESTRUCTED / DESTROYED

5. PARTICULARS OF RECORD

Please provide full particulars of the record for which the information contained therein may be corrected / deleted/ destructed / destroyed, including the reference number if that is known to you, to enable the record to be located. If the space provided is insufficient, please continue on a separate folio and attach it to this form. Please sign the additional folio(s).

1. Description of record or relevant part of the record:

2. Reference number, if available:

3. Any further particulars of record:

4. Reasons for the correction, deletion, or destruction of the record:

6. NOTICE OF DECISION REGARDING REQUEST

You will be notified by email whether your request has been approved / denied. If you wish to be informed thereof in another manner, please provide the necessary particulars:

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.

Signed at _____ on this _____ day of _____ 20 _____

Signature of requester _____

FOR OFFICE USE ONLY

Decision by Deputy Information Officer

Deputy Information Officer

Date