



## SFI HEALTH SA (PTY) LTD

This manual has been prepared in terms of the section 51 of the Promotion of Access to Information Act 2 of 2000 and to address the requirements of the Protection of Personal Information Act 4 of 2014.

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## 1. DEFINITIONS

Client	any natural or juristic person that received or receives services from the Company
Conditions for Lawful Processing	the conditions for the lawful processing of Personal Information as fully set out in chapter 3 of POPI and in paragraph 12 of this Manual
Data Subject	the person to whom personal information relates
Information Officer	the individual who is identified in paragraph 3 of this manual
Manual	this manual
PAIA	the Promotion of Access to Information Act 2 of 2000
Personal Information	means information relating to an identifiable, living, natural person, and where it is applicable, an identifiable, existing juristic person, including, but not limited to— <ul style="list-style-type: none"><li>a. information relating to the race, gender, sex, pregnancy, marital status, national, ethnic or social origin, colour, sexual orientation, age, physical or mental health, well-being, disability, religion, conscience, belief, culture, language and birth of the person;</li></ul>

- b. information relating to the education or the medical, financial, criminal or employment history of the person;
- c. any identifying number, symbol, e-mail address, physical address, telephone number, location information, online identifier or other particular assignment to the person;
- d. the biometric information of the person;
- e. the personal opinions, views or preferences of the person;
- f. correspondence sent by the person that is implicitly or explicitly of a private or confidential nature or further correspondence that would reveal the contents of the original correspondence;
- g. the views or opinions of another individual about the person; and
- h. the name of the person if it appears with other personal information relating to the person or if the disclosure of the name itself would reveal information about the person

#### Personnel

any person who works for, or provides services to or on behalf of the Company, and receives or is entitled to receive remuneration and any other person who assists in carrying out or conducting the business of the Company, which includes, without limitation, directors (executive and non-executive), all permanent, temporary and part-time staff as well as contract workers

#### POPI

the Protection of Personal Information Act 4 of 2013

POPI Regulations                      the regulations promulgated in terms of section 112(2) of POPI

Private Body                      means—

- a. a natural person who carries or has carried on any trade, business or profession, but only in such capacity;
- b. a partnership which carries or has carried on any trade, business or profession; or
- c. any former or existing juristic person, but excludes a public body

Processing                      means any operation or activity or any set of operations, whether or not by automatic means, concerning personal information, including—

- a. the collection, receipt, recording, organisation, collation, storage, updating or modification, retrieval, alteration, consultation or use;
- b. dissemination by means of transmission, distribution or making available in any other form; or
- c. merging, linking, as well as restriction, degradation, erasure or destruction of information

SAHRC                      the South African Human Rights Commission

Any other terms not described herein will have the meaning as ascribed to it in terms of PAIA or POPI.

## 2. INTRODUCTION

1. For the purpose of POPI and PAIA, SFI Health SA (Pty) Ltd is defined as a private body.  
In accordance with the company's obligations in terms of POPI and PAIA, SFI Health SA (Pty) Ltd has produced this manual.
2. This manual sets out all information required by both PAIA and POPI.
3. This manual also deals with how requests are to be made in terms of PAIA.
4. This manual also establishes how compliance with POPI is to be achieved.

## 3. CONTACT DETAILS

<b>Name:</b>	SFI Health SA (Pty) Ltd
<b><u>Registration Number:</u></b>	2004/035255/07
<b><u>Physical Address:</u></b>	Suite 2B, Second Floor 121 Mitchell Street George 6529
<b><u>Postal Address:</u></b>	PO Box 9132 George 6530
<b><u>Contact Number:</u></b>	(044) 874 2927
<b><u>Information Officer:</u></b>	Lize Viljoen
<b><u>Email address:</u></b>	Lize.Viljoen@sfihealth.com

Background information of the company can be found at:

<https://www.flordis.co.za/>

#### **4. GUIDE OF THE INFORMATION REGULATOR**

1. A guide to PAIA and how to access information in terms of PAIA has been published pursuant to section 10 of PAIA.
2. The guide contains information required by an individual who may wish to exercise their rights in terms of PAIA.
3. Should you wish to access the guide you may request a copy from the Information Officer by submitting **ANNEXURE A**, attached hereto, to the details specified above.
4. You may also inspect the guide at the Company's offices during ordinary working hours.
5. You may also request a copy of the guide from Information Regulator at the following details:

##### **Information Regulator:**

Postal Address: P.O. Box 31533, Braamfontein, Johannesburg, 2017

Telephone: (010) 023 5200

Website: [www.justice.gov.za](http://www.justice.gov.za)

Email: [PAIACompliance.IR@justice.gov.za](mailto:PAIACompliance.IR@justice.gov.za)

#### **5. LATEST NOTICES IN TERMS OF SECTION 52(2) OF PAIA**

1. At this stage no Notice(s) has / have been published on the categories of records that are available without having to request access to them in terms of PAIA.

## **6. AVAILABILITY OF CERTAIN RECORDS IN TERMS OF PAIA**

1. The Company holds and/or process the following records for the purposes of PAIA and POPI.
2. The following records may be requested, however it should be noted that there is no guarantee that the request will be honoured. Each request will be evaluated in terms of PAIA and any other applicable legislation.

### **Products and/or Services:**

- All products and/or services are available freely on the Company's website as set out above.

### **Human Resources:**

- Employment Contracts
- Personnel records and correspondence
- Training records
- Internal policies

### **Legal:**

- Agreements with Clients
- Agreement with Suppliers
- Shareholder agreements
- Partnership agreements
- Licenses and Permits
- Power of Attorneys
- Sale agreements
- Lease agreements

### **Company Secretarial:**

- Memorandum of Incorporation
- Secretarial records



- Tradename registrations
- Company registration documents
- Statutory registers
- Minutes of Director's meetings
- Register of Directors
- Share Certificates

**Financial:**

- Accounting records
- Annual reports
- Interim reports
- Auditor details and reports
- Tax returns
- Insurance records

**Client:**

- Client database
- Correspondence with Clients
- Documentation prepared for Clients.
- Invoices, receipts, credit and debit notes

**Marketing:**

- Published Marketing material

**Miscellaneous:**

- Internal Correspondence
- Information technology records
- Domain name registrations
- Website information
- Asset registers

## **7. RECORDS AVAILABLE IN TERMS OF OTHER LEGISLATION**

SFI Health SA (Pty) Ltd may be in possession of records in terms of the following legislation as and when applicable:

1. Basic Conditions of Employment Act, No. 75 of 1997
2. Companies Act, No. 71 of 2008
3. Compensation for Occupational Injuries and Diseases Act, No. 130 of 1993
4. Constitution of the Republic of South Africa Act, No. 108 of 1996
5. Electronic Communication and Transactions Act, No. 25 of 2002
6. Employment Equity Act, No. 55 of 1998
7. Financial Intelligence Centre Act, No. 38 of 2001
8. The Labour Relations Act, No. 66 of 1995
9. Protection of Personal Information Act. No 4 of 2013
10. Promotion of Access to Information Act, No. 2 of 2000
11. Skills Development Levies Act, No. 9 of 1999
12. Unemployment Insurance Act, No. 63 of 2001
13. Value Added Tax Act, No. 89 of 1991
14. Income Tax Act, No. 58 of 1962
15. Occupational Health and Safety Act No. 85 of 1993

## **8. REQUEST PROCESS**

1. An individual who wishes to place a request must comply with all the procedures laid down in PAIA.
2. The requester must complete **ANNEXURE B**, which is attached hereto and submit it to the Information Officer at the details specified above.
3. The prescribed form must be submitted as well as payment of a request fee and a deposit, if applicable to the information officer at the postal or physical address, fax number or electronic mail as is stated herein.
4. The prescribed form must be completed with enough particularity to enable the information officer to determine:
  1. The record(s) requested;

2. The identity of the requestor;
  3. What form of access is required; and
  4. The postal address or fax number of the requestor.
- 
5. The requestor must state that the records are required for the requestor to exercise or protect a right, and clearly state what the nature of the right is so to be exercised or protected. An explanation of why the records requested is required to exercise or protect the right.
  6. The request for access will be dealt with within 30 days from date of receipt, unless the requestor has set out special grounds that satisfies the Information Officer that the request be dealt with sooner.
  7. The period of 30 days may be extended by not more than 30 additional days, if the request is for a large quantity of information, or the request requires a search for information held at another office of the Company and the information cannot be reasonably obtained within 30 days. The information officer will notify the requestor in writing should an extension be necessary.
  8. The requestor will be informed in writing whether access to the records have been granted or denied. If the requestor requires a reason for the decision the request must be expressed in the prescribed form, the requestor must be further stated what particulars of the reasoning the requestor requires.
  9. If a requestor has requested the records on another individual's behalf, the requestor must submit proof of the capacity the requestor submits the request in, to the satisfaction of the information officer.
  10. Should the requestor have any difficulty with the form or the process laid out herein, the requestor should contact the Information Officer for assistance.
  11. An oral request can be made to the Information Officer should the requestor be unable to complete the form due to illiteracy or a disability. The Information Officer will complete the form on behalf of the requestor and provide a copy of the form to the requestor.

## 9. GROUND FOR REFUSAL

The following are grounds upon which the company may, subject to the exceptions in Chapter 4 of PAIA, refuse a request for access in accordance with Chapter 4 of PAIA:

- a) Mandatory protection of the privacy of a third party who is a natural person, including a deceased person, where such disclosure of Personal Information would be unreasonable
- b) Mandatory protection of the commercial information of a third party, if the Records contain:
  - i. Trade secrets of that third party;
  - ii. Financial, commercial, scientific or technical information of the third party, the disclosure of which could likely cause harm to the financial or commercial interests of that third party; and/or
  - iii. Information disclosed in confidence by a third party to The company, the disclosure of which could put that third party at a disadvantage in contractual or other negotiations or prejudice the third party in commercial competition;
- c) Mandatory protection of confidential information of third parties if it is protected in terms of any agreement;
- d) Mandatory protection of the safety of individuals and the protection of property;
- e) Mandatory protection of records that would be regarded as privileged in legal proceedings;
- f) Protection of the commercial information of the company, which may include:
  - i. Trade secrets;
  - ii. Financial/commercial, scientific or technical information, the disclosure of which could likely cause harm to the financial or commercial interests of the company;
  - iii. Information which, if disclosed, could put the company at a disadvantage in contractual or other negotiations or prejudice the company in commercial competition; and/or

- iv. Computer programs which are owned by the company, and which are protected by copyright and intellectual property laws;
- v. Research information of the company or a third party, if such disclosure would place the research or the researcher at a serious disadvantage; and
- vi. Requests for Records that are clearly frivolous or vexatious, or which involve an unreasonable diversion of resources.

## **10. REMEDIES SHOULD A REQUEST BE REFUSED**

- 1. SFI Health SA (Pty) Ltd does not have an internal appeal procedure in light of a denial of a request, decisions made by the information officer is final;
- 2. The requestor may in accordance with sections 56(3) (c) and 78 of PAIA, apply to a court for relief within 180 days of notification of the decision for appropriate relief.

## **11. Fees**

The following fees shall be payable upon request by a requestor:

	<b><u>Description</u></b>	<b><u>Fee</u></b>
1.	Request fee  (payable on every request)	<b>R140.00</b>
2.	Photocopy of an A4 page or part thereof	<b>R2.00</b>
3.	Printed copy of an A4 page or part thereof	<b>R2.00</b>
4.	Hard copy on flash drive  (flash drive to be provided by requestor)	<b>R40.00</b>
5.	Hard copy on a compact disc  (compact disc to be provided by requestor)	<b>R40.00</b>
6.	Hard copy on a compact disc  (compact disc to be provided by the company)	<b>R60.00</b>

7.	Transcription of visual images per A4 page	As per quotation of service provider
8.	Copy of visual images	As per quotation of service provider
9.	Transcription of an audio record per A4 page	R24.00
10.	Copy of an audio record on flash drive (flash drive to be provided by requestor)	R40.00
11.	Copy of an audio on a compact disc (compact disc to be provided by requestor)	R40.00
12.	Copy of an audio on a compact disc (compact disc to be provided by the Company)	R60.00
13.	To search for and prepare the record for disclosure for each hour or part of an hour, excluding the first hour, reasonably required for such search and preparation	R145.00
14.	To search for and prepare the record for disclosure for each hour or part of an hour, excluding the first hour, reasonably required for such search and preparation (cannot exceed total cost)	R435.00
15.	Postage, email or any other electronic transfer	Actual expense, if any.

## 12. POPI

Conditions for lawful processing:

1. POPI has eight conditions for lawful processing and includes:
  - a) Accountability
  - b) Processing limitation
  - c) Purpose specification
  - d) Further processing limitation
  - e) Information quality
  - f) Openness

- g) Security safeguards
- h) Data subject participation

2. SFI Health SA (Pty) Ltd is involved in the following types of processing:

- a) Collection
- b) Recording
- c) Organization
- d) Structuring
- e) Storage
- f) Adaptation or alteration
- g) Retrieval
- h) Consultation
- i) Use
- j) Disclosure by transmission
- k) Dissemination or otherwise making available
- l) Alignment or combination
- m) Restriction
- n) Erasure
- o) Destruction

3. SFI Health SA (Pty) Ltd processes information for the following purposes:

- a) to fulfil agreements in relation to its employees;
- b) to provide products to its clients in accordance with terms agreed to by client;
- c) to undertake activities related to the provision of products and services, such as:
  - i. to fulfil domestic legal, regulatory and compliance requirements
  - ii. to verify the identity of customer representatives who contact the company or may be contacted by the company;

- iii. for risk assessment, information security management, statistical, trend analysis and planning purposes;
  - iv. to enforce or defend the company or the company affiliates' rights;
  - v. to manage the company's relationship with its clients, which may include providing information to its clients and its clients affiliates about the company's and the company affiliates' products and services;
  - vi. the purposes related to any authorised disclosure made in terms of agreement, law or regulation;
  - vii. any additional purposes expressly authorised by the company's client;
  - viii. any additional purposes as may be notified to the client or data subjects in any notice provided by the company.
2. The company processes personal information the following categories of data subjects:
- 1. Juristic persons –
    - a) Clients
    - b) Suppliers
  - 2. Natural persons –
    - a) Individuals
    - b) Staff
    - c) Clients
    - d) Suppliers
3. SFI Health SA (Pty) Ltd processes the following categories personal information:
- a) Client profile information;
  - b) Bank account details;
  - c) Payment information;
  - d) Client representatives information;



- e) Names;
  - f) Email Addresses;
  - g) Telephone numbers;
  - h) Facsimile numbers;
  - i) Physical addresses;
  - j) Tax numbers;
  - k) Identity Numbers;
  - l) Passport Numbers;
4. Recipients of Personal Information:
- a) The company, the company's affiliates, their respective representatives
5. When making authorised disclosures or transfers of personal information in terms of Section 72 of POPI, personal information may be disclosed to recipients in countries that do not have the same level of protection for personal information as South Africa does.
6. The following Security measures are implemented by the company:
- a) The company implements numerous Security measures to protect personal information that is stored electronically and physically.
  - b) The company ensures that appropriate security measures are taken and updates these measures on a regular basis.
  - c) The company have also implemented various policies for additional security for personal information stored both physically and electronically.
  - d) The personal information that is stored physically is protected as follows:
    - i. Where physical records of the data exist, such records will be stored in a secure area that can be 'locked-away' as to avoid a breach of the personal information.
    - ii. Such physical data records will be 'locked-away' and secured when not in use.

7. The company may share personal information with third parties and in certain instances this may result in cross border flow of the personal information. The personal information will always be subject to protection, not less than the protection it is afforded under the Protection of Personal Information Act No.4 of 2013.
8. Objection to the processing of personal information by a data subject:
  - a) Section 11(3) of POPI and regulation 2 of the POPI regulations provides that a data subject may, at any time object to the processing of their personal information in the prescribed form attached to this manual as **ANNEXURE "B"**.
9. Request for correction or deletion of personal information:
  - a) Section 24 of POPI and regulation 3 of the POPI regulations provides that a data subject may request for their personal information to be corrected and/or deleted in the prescribed form attached hereto as **ANNEXURE "C"**.

SIGNATURE INFORMATION OFFICER

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

ANNEXURE A

**FORM 1**

**REQUEST FOR A COPY OF THE GUIDE**

[Regulations 3]

**TO:** The Information Officer

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I,

Full names:			
In my capacity as (mark with "x"):	Information officer		Other
Name of *public/private body (if applicable)			
Postal Address:			
Street Address:			
E-mail Address:			
Facsimile:			
Contact numbers:	Tel.(B):		Cellular:

Hereby request the following copy (ies) of the Guide:

Language (mark with "X")	No of copies	Language (mark with "X")	No of copies
<input type="checkbox"/> Sepedi		<input type="checkbox"/> Sesotho	
<input type="checkbox"/> Setswana		<input type="checkbox"/> siSwati	
<input type="checkbox"/> Tshivenda		<input type="checkbox"/> Xitsonga	
<input type="checkbox"/> Afrikaans		<input type="checkbox"/> English	
<input type="checkbox"/> isiNdebele		<input type="checkbox"/> isiXhosa	
<input type="checkbox"/> isiZulu			

Manner of collection (mark with "x"):

Personal collection	Postal address	Facsimile	Electronic communication (Please specify)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
Signature of requester

ANNEXURE B

## FORM 2

### REQUEST FOR ACCESS TO RECORD

[Regulation 7]

**NOTE:**

1. *Proof of identity must be attached by the requester.*
2. *If requests made on behalf of another person, proof of such authorisation, must be attached to this form.*

**TO:** The Information Officer


(Address)

E-mail address:

Fax number:

Mark with an "X"

☐

Request is made in my own name

☐

Request is made on behalf of another person.

PERSONAL INFORMATION			
Full Names			
Identity Number			
Capacity in which request is made <i>(when made on behalf of another person)</i>			
Postal Address			
Street Address			
E-mail Address			
Contact Numbers	Tel. (B):		Facsimile:
	Cellular:		
Full names of person on whose behalf request is made <i>(if applicable)</i> :			
Identity Number			
Postal Address			

Street Address			
E-mail Address			
Contact Numbers	Tel. (B)		Facsimile
	Cellular		
<b>PARTICULARS OF RECORD REQUESTED</b>			
<i>Provide full particulars of the record to which access is requested, including the reference number if that is known to you, to enable the record to be located. (If the provided space is inadequate, please continue on a separate page and attach it to this form. All additional pages must be signed.)</i>			
Description of record or relevant part of the record:			
Reference number, if available			
Any further particulars of record			
<b>TYPE OF RECORD</b> (Mark the applicable box with an "X")			
Record is in written or printed form			
Record comprises virtual images (this includes photographs, slides, video recordings, computer-generated images, sketches, etc)			
Record consists of recorded words or information which can be reproduced in sound			
Record is held on a computer or in an electronic, or machine-readable form			

<b>FORM OF ACCESS</b> (Mark the applicable box with an "X")	
Printed copy of record (including copies of any virtual images, transcriptions and information held on computer or in an electronic or machine-readable form)	
Written or printed transcription of virtual images (this includes photographs, slides, video recordings, computer-generated images, sketches, etc)	
Transcription of soundtrack (written or printed document)	
Copy of record on flash drive (including virtual images and soundtracks)	
Copy of record on compact disc drive (including virtual images and soundtracks)	
Copy of record saved on cloud storage server	

<b>MANNER OF ACCESS</b> (Mark the applicable box with an "X")	
Personal inspection of record at registered address of public/private body (including listening to recorded words, information which can be reproduced in sound, or information held on computer or in an electronic or machine-readable form)	
Postal services to postal address	
Postal services to street address	
Courier service to street address	
Facsimile of information in written or printed format (including transcriptions)	
E-mail of information (including soundtracks if possible)	
Cloud share/file transfer	
Preferred language (Note that if the record is not available in the language you prefer, access may be granted in the language in which the record is available)	

<b>PARTICULARS OF RIGHT TO BE EXERCISED OR PROTECTED</b>	
<i>If the provided space is inadequate, please continue on a separate page and attach it to this Form. The requester must sign all the additional pages.</i>	
Indicate which right is to be exercised or protected	



Explain why the record requested is required for the exercise or protection of the aforementioned right:	

FEES	
a)	<i>A request fee must be paid before the request will be considered.</i>
b)	<i>You will be notified of the amount of the access fee to be paid.</i>
c)	<i>The fee payable for access to a record depends on the form in which access is required and the reasonable time required to search for and prepare a record.</i>
d)	<i>If you qualify for exemption of the payment of any fee, please state the reason for exemption</i>
Reason	

You will be notified in writing whether your request has been approved or denied and if approved the costs relating to your request, if any. Please indicate your preferred manner of correspondence:

Postal address	Facsimile	Electronic communication (Please specify)

Signed at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

--

**Signature of Requester / person on whose behalf request is made**

**FOR OFFICIAL USE**

Reference number:	
Request received by: (State Rank, Name And Surname of Information Officer)	
Date received:	
Access fees:	
Deposit (if any):	

--

**Signature of Information Officer**

ANNEXURE C

14 No. 42110

GOVERNMENT GAZETTE, 14 DECEMBER 2018

FORM 2

**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, 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.

Mark the appropriate box with an "x".

**Request for:**

☐

Correction or deletion of the personal information about the data subject which is in possession or under the control of the responsible party.

☐

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
Name(s) and surname / registered name of data subject:	
Unique identifier/ Identity Number:	
Residential, postal or business address:	
	Code (      )
Contact number(s):	
Fax number/E-mail address:	
B	DETAILS OF RESPONSIBLE PARTY
Name(s) and surname / registered name of responsible party:	
Residential, postal or business address:	
	Code (      )
Contact number(s):	



Fax number/ E-mail address:	
<b>C</b>	<b>INFORMATION TO BE CORRECTED/DELETED/ DESTRUCTED/ DESTROYED</b>
<b>D</b>	<b>REASONS FOR *CORRECTION OR DELETION OF THE PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(a) WHICH IS IN POSSESSION OR UNDER THE CONTROL OF THE RESPONSIBLE PARTY ; and or</b> <b>REASONS FOR *DESTRUCTION OR DELETION OF A RECORD OF PERSONAL INFORMATION ABOUT THE DATA SUBJECT IN TERMS OF SECTION 24(1)(b) WHICH THE RESPONSIBLE PARTY IS NO LONGER AUTHORISED TO RETAIN.</b> <i>(Please provide detailed reasons for the request)</i>

Signed at ..... this ..... day of .....20.....

.....  
*Signature of data subject/ designated person*