



**REQUEST FOR ACCESS TO PERSONAL DATA**

**DETAILS OF THE DATA SUBJECT**

*This section is to provide the details of the Data Subject).*

Name\*.....

Identity Number\* :.....

Phone number\*:

e-mail address:.....

*(Provide the following details where making a request on behalf of a minor or a person who has no capacity)*

Name\*.....

Relationship with the Data Subject\*.....

Contact Information\*.....

**DETAILS OF THE PERSONAL DATA REQUESTED**

*(Describe the personal data requested).....*

**MODE OF ACCESS**

I would like to: *(check all that apply)*

Inspect the record

Listen to the record

Have a copy of the record made available to me in the following format:

photocopy *(Please note that copying costs will apply)* number of copies required: .....

electronic

transcript *(Please note that transcription charges may apply)*

Other *(specify)* .....

**DELIVERY METHOD**

collection in person

by mail (provide address where different / in addition to details provided above)

**DECLARATION**

Note any attempt to access personal data through misrepresentation may result in prosecution. I certify that the information given in this application is true.

Signature.....Date.....

Please email the complete form to [dataprivacy@afrisend.com](mailto:dataprivacy@afrisend.com)

Our Data privacy team will reach out within 5 business days upon receipt of your email; however, requests to access personal data are not guaranteed and will be considered on a case-by-case basis in accordance with data privacy laws.