

FORM DPG 1

(r. 7 (2) & (r.8 (2))

**REQUEST FOR RESTRICTION OR OBJECTION TO
THE PROCESSING OF PERSONAL DATA**

Note

- (i) **Documentary evidence in support of the objection may be required.**
- (ii) **Where the space provided for in this Form is inadequate, submit information as all Annexure**

A. NATURE OF REQUEST

Mark the appropriate box with an "x". Request for:

RESTRICTION	<input type="checkbox"/>	OBJECTION	<input type="checkbox"/>	LOAN CANCELLATION	<input type="checkbox"/>
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B. DETAILS OF THE DATA SUBJECT Name:

Identity Number:

Phone number:

E-mail address:



(Your details below where initiating the request for a minor or a person who has no capacity)

Name:

Relationship with the Data Subject Contact Information:

C. REASONS FOR THE REQUEST

(Please provide detailed reasons for the restriction or objection)

D. DECLARATION

I certify that the information given in this application is true

Signature

Date