

**ANNEXURE B**

**FORM 1**

**OBJECTION TO THE PROCESSING OF PERSONAL INFORMATION IN TERMS OF  
SECTION 11(3) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013  
(ACT NO. 4 OF 2013)**

**REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2017**  
[Regulation 2(1)]

*Note:*

- 1. Affidavits or other documentary evidence in support of the objection 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.....

<b>A</b>	<b>DETAILS OF DATA SUBJECT</b>
Name and surname of data subject:	
Residential, postal or business address:	
Contact number(s):	
FAX number:	
E-mail address:	
<b>B</b>	<b>DETAILS OF RESPONSIBLE PARTY</b>
Name and surname of responsible party <i>(if the responsible party is a natural person):</i>	

Residential, postal or business address:	
Contact number(s):	
FAX number:	
E-mail address:	
Name of public or private body ( <i>if the responsible party is not a natural person</i> ):	
Business address:	
Contact number(s):	
FAX number:	
E-mail address:	
<b>C</b>	<b>REASONS FOR OBJECTION (Please provide detailed reasons for the objection)</b>


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

\_\_\_\_\_  
*Signature of Data subject (applicant)*

**FEES PAYABLE IN RESPECT OF RECORDS REQUESTED FROM FACECAMALERT**

**ANNEXURE C**

	<b>DETAILS OF REQUEST</b>	<b>COST</b>
1	Standard fee for any request to be processed regardless of success of request.	R200
2	If successful the following amount is payable for the provision of feedback, footage and documentation where applicable.	R400