GDPR DATA SUBJECT ACCESS REQUEST FORM

Should SAICA hold your Personal Information, you are currently entitled to request access to such information, in accordance to the provisions of the Protection of Personal Information Act, 4 of 2013 (not effective as yet) and the General Data Protection Regulation (EU) 2016/679 ("GDPR") (which comes into effect on the 25th of May 2018), where applicable.

Should you require access to your aforesaid information, you are required to complete this Form to enable us to provide you with the relevant information.

We will endeavour to respond to your request promptly, but in at least 30 (thirty) days, as follows:

- our confirmation of receipt of your request; or

- our receipt of any further information we may require from you to enable us to comply with your request.

Please note that, depending on the complexity and number of request we may extend the period by a further 2 (two) months, of which we will inform you of such extension within 1 (one) month of your request.

Note that the information you provide in this form will merely be used for the purpose of identifying you and the personal information you are requesting and enabling us to respond to your request. The completion of this form is not mandatory for you to make your request, such will however assist us in processing your request efficiently.

Section A: Details of Person Requesting Information

Full Name and Surname:	
Identity Number:	

Contact Telepphone Number:	
Email Address:	
Physical Address:	
Member Number (if Applicable):	

Section B: Are you the Data Subject:

Please tick the appropriate box and peruse the instructions:

☐ **Yes, I am the Data Subject.** I enclose herewith proof of my identity and physical address, please tick the boxes in terms of the proof:

Identification document	☐
Passport	☐
Driver's License	☐
Birth Certificate	☐
Utility Bill or Bank Statement, not older than 3 (three) months	☐
TV License or Local Authority Tax Bill reflecting my physical address, not older than 1 (one) year	☐

☐ **No, I am not the Data Subject.** I am acting on behalf of the Data Subject and enclose hereto proof of my identity, as well as the Data Subject, and a copy of the Data Subject's written authority. (Please complete **Section C** hereof)

<u>My Documentation</u>	☐
Identification document	☐
Passport	☐
Driver's License	☐

Birth Certificate	☐
Utility Bill or Bank Statement, not older than 3 (three) months	☐
TV License or Local Authority Tax Bill reflecting my physical address, not older than 1 (one) year	☐
Written Mandate Signed by Data Subject	☐
<u>Data Subject's Documentation</u>:	☐
Identification document	☐
Passport	☐
Driver's License	☐
Birth Certificate	☐
Utility Bill or Bank Statement, not older than 3 (three) months	☐
TV License or Local Authority Tax Bill reflecting my physical address, not older than 1 (one) year	☐

We need to ensure that we are releasing the information to the correct person and thus we require proof of your identity and your physical address. Please provide us with a certified photocopy of scanned image of one of both of the following:

- **Proof of Identity**
  Identity Document, Passport, Driving License or Birth Certificate.
- **Proof of Physical Address**
  Utility Bill or Bank Statement, not older than 3 (three) months; TV Licence or Local Authority Tax Bill reflecting your physical address, not older than 1 (one) year.

In the event in which we are not satisfied that you have proven your identity, we reserve the right to refuse to grant your request.

Section C: Details of Data Subject (if different from Section A)

Full Name and Surname:	
Identity Number:	
Contact Telepphone Number	
Email Address:	
Physical Address:	
Member Number (if Applicable):	

Section D: Description what Information you require

Please provide any relevant details you are of opinion would assist us in identifying the information you require:

It is important to note, that should the information provided above reveal information directly or indirectly relate to another person we will require such person's consent prior to us providing you with the information. In certain circumstances, where the information requested would adversely affect the rights and freedoms of others, we may not be able to disclose the information to you, in which case you will be informed promptly and provided with reasons for our decision.

While in most cases we will be happy to provide you with the information you request, we nevertheless reserve the following rights, in accordance to:

- Article 12 (5) of the GDPR to charge a reasonable fee or refuse your request if is considered as being manifestly unfounded, excessive or repetitive;
- Article 14 (5) of the GDPR to refuse your request due to the fact that you already have such information or providing such information proves impossible or would involve a disproportionate effort, in particular for processing for archiving purposes in the public interest, scientific or historical research purposes or statistical purposes, subject to the conditions and safeguard referred to in article 89 (1) of the GDPR; or
- In terms of Article 14 (1) the GDPR it is likely to render impossible or it would seriously impair the achievement of the objectives of that processing..

We will however make every effort possible to provide you with a satisfactory form of access or summary of the information, if suitable.

Section E: Information about the Collection and Processing of Personal Information

Should you require information about any of the following, please tick the relevant boxes:

- Why SAICA is processing your Personal Information □
- To whom your Personal Information are disclosed □
- The Source of your Personal Information □

Section F: Disclosure of CCTV images

Should the information you require be in the form of video images captured by our CCTV Security Cameras, would you be satisfied with viewing these images?

Yes □   No □

Section G: Declaration

Please note: any attempt to mislead SAICA may result in prosecution.

I, undersigned

_____

(Name and Surname)

do hereby,

1. confirm that I have read and understood the terms of this Data Subject Access Request Form;

2. consent to the processing of the personal information that I am submitting in this form and any personal information I may submit in further correspondence for purposes of processing this request, and where necessary my details may be shared with the supervisory authority;

3. certify that the information provided in this application is true, correct and within my personal knowledge; and that I'm authorised to submit this request;

4. understand that it is necessary to confirm my identify, and where applicable also the Data Subject's Identity on whose behalf I am acting; and

5. it might be necessary to obtain more detailed information in order to locate the correct personal information;

6. confirm that I understand that SAICA will not be able to process my request if this Form is not properly completed or incomplete.

_____   _____
Signature   Date:

Supplementary Documentation Mandatory to this Data Subject Access Request Form:

- **Proof of your Identity (refer to Section B hereof);**

- **Proof of the Data Subject's Identity (if different to the above);**

- **If applicable, authority from the Data Subject wherein you are mandated to act on his/her behalf.**

Please address and return your completed form, together with the mandatory documentation to:

The SAICA Data Protection Officer

Physical Address:

The South African Institute of Chartered Accountants

17 Fricker Road

Illovo

Sandton

Johannesburg

2196

Email: GDPRcompliance@saica.co.za

Telephone Number: +2711 621 6710 / 6979

Important:

Should you on receipt of the Information requested believe that:

- the information is inaccurate or out of date;
- we should no longer be holding your information;
- we are using your information for a purpose of which you are unaware;
- we may have passed inaccurate information about you to someone else;

then you could notify the SAICA's Data Protection Officer immediately.