



**INFORMATION
REGULATOR
(SOUTH AFRICA)**

*Ensuring protection of your personal information
and effective access to information*

INFORMATION OFFICER'S REGISTRATION FORM

NOTE: *The personal information submitted herein shall be solely used for your registration with the Information Regulator ("Regulator").*

All the information submitted herein shall be used for the purpose stated above, as mandated by law. This Information may be disclosed to the public. The Regulator undertakes to ensure that appropriate security controls measures are implemented to protect all the information to be submitted in this document.

PART A INFORMATION OFFICER	
Full name of Information Officer	
Designation	
Postal Address	
Physical Address	
Cellphone Number	
Landline Number	
Fax Number	
Direct Email Address	
General Email Address	
	<i>I consent to being contacted by the Regulator, requester or data subject at the above contact details or through my designated Deputy Information Officer(s), whose information is provided herein below.</i>

PART B DEPUTY INFORMATION OFFICER			
Personal details of designated Deputy Information Officer(s)	Name	Name	Name
	Direct Landline	Direct Landline	Direct Landline
	Cellphone Number	Cellphone Number	Cellphone Number
	Email Address	Email Address	Email Address
Postal Address			
Physical Address			
Fax Number			
General Email Address			
<i>I/we consent to being contacted by the Regulator, requester or data subject at the above contact details</i>			

PART C BODY/RESPONSIBLE PARTY			
Type of Body	Public Body		Private Body <i>x</i>
Full Name of the Body (Registered Name)			
Trading Name			
Registration No if any			

Postal Address	
Physical Address	
Landline Number	
Fax Number	
Email Address	
Website	

**PART D
DECLARATION**

I declare that the information contained herein is true, correct and accurate.

SIGNED and **DATED** at _____ on this the ___ day of _____ 2021

INFORMATION OFFICER