



CONSENT TO PROCESS PERSONAL INFORMATION IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013) (POPIA)

WHEREAS the purpose of the POPIA is to promote the protection of personal information of individuals and businesses and to give effect to their right of privacy as provided for in the Constitution of the Republic of South Africa, 1996.

ACKNOWLEDGING that by signing this Form, I consent for my personal information to be processed by the Department of Forestry, Fisheries and the Environment (the Department) and consent is effective immediately and will remain effective until such time that the consent is withdrawn.

1. I a natural person "herein referred to as the Data Subject" with ID No..... representing Facility (name)..... hereby give my consent to the Department "herein referred to as the Responsible Party" to collect, process and distribute my personal information related to exclusion application reference number
2. Where the Department is legally required to process the personal information as part of the publishing processes involved in the implementation of the Waste Regulations of 2017, regarding the exclusion of a waste stream or a portion of a waste stream from the definition of waste, the processing of such personal information must be done in terms of section 4 of POPIA, read together with section 6.
3. I understand my right to privacy and the right to have my personal information processed in accordance with the conditions for the lawful processing of personal information.
4. I understand the purposes for which my personal information is required and for which it will be used, consent to third parties accessing my personal information and to the Department sharing my personal information strictly for the processing of the relevant exclusion applications and for



CONSENT TO PROCESS PERSONAL INFORMATION IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013) (POPIA) any reporting purposes.

- 5. I understand that, should I refuse to provide the Department with the required consent and/or information, the Department may be unable to assist with the processing of my exclusion applications.
- 6. I understand that, I will also seek to provide such written consent to any third party that may require or process my personal details on my exclusion application forms and supporting documents, including but limited to specialists.
- 7. I declare that all my personal information supplied to the Department is accurate, up to date, not misleading and that it is complete in all respects and will be held and/ or stored securely for the purpose for which it was collected.
- 8. I also understand that I have the right to request that my personal information be corrected or deleted, if it is inaccurate, irrelevant, excessive, out of date, incomplete, misleading, or obtained unlawfully or that the personal information or record be destroyed or deleted if the Responsible Party is no longer authorised to retain it.

Signed at on this day of20.....

.....

Signature of data subject/ designated person

.....

Date

.....

Name/Surname/Dept of Responsible Party- Signature

.....

Date