



**Objection to the Processing of Personal Information**

<b>Entity</b>	TPPPAY Proprietary Limited
<b>Trading as</b>	TPay
<b>Registration Number</b>	2025/544950/07
<b>Website</b>	www.tppp.africa
<b>Submission Email</b>	rgwenzi@tppp.africa

**Submission instructions:** Please complete this form and email it, together with supporting documents, to rgwenzi@tppp.africa.

**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: Affidavits or other documentary evidence in support of the objection must be attached. If the space provided in this form is inadequate, submit information as an annexure and sign each page.

<b>Reference Number</b>	
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**A. Details of Data Subject**

<b>Name and surname of data subject</b>	
<b>Identity / registration number</b>	
<b>Residential, postal or business address</b>	
<b>Code</b>	
<b>Contact number(s)</b>	
<b>Fax number</b>	
<b>Email address</b>	

**B. Details of Responsible Party**

<b>Name of public or private body</b>	TPPPAY Proprietary Limited, trading as TPay
<b>Business address</b>	122 Beech Street, Northcliff, Johannesburg, 2195
<b>Contact number(s)</b>	Not published
<b>Fax number</b>	Not published
<b>Email address</b>	rgwenzi@tppp.africa
<b>Website</b>	www.tppp.africa

**C. Representative Details, Where Applicable**

Representative name	
Representative contact details	
Capacity in which representative acts	
<b>Proof of Authority Attached</b>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Not applicable

**D. Details of Personal Information Concerned**

Category of personal information	
Description of personal information	
Where or how TPay obtained the information, if known	
Related TPay service, transaction or	
<b>E. Reasons for Objection (please provide detailed</b>	
<b>F. Requested Outcome</b>	

**G. Supporting Documents**

<input type="checkbox"/> Proof of identity attached
<input type="checkbox"/> Proof of authority attached, if applicable
<input type="checkbox"/> Supporting correspondence attached
<input type="checkbox"/> Other supporting documents attached
<input type="checkbox"/> No supporting documents attached

**Declaration**

I confirm that the information provided in this form is true, accurate and complete to the best of my knowledge. I understand that TPay may process the information provided in this form to verify my identity or authority, assess this objection and respond to this request in accordance with POPIA and applicable law.

Name of data subject / applicant	
Signature	
Date	