**Personal Data Correction Form**

Sergent Services Pte Ltd (“Sergent Services”) aims to act in compliance with the requirements of the Personal Data Protection Act (PDPA).

Singapore Personal Data Protection Act has specified that organizations are not obligated to make corrections to the following:

* Opinion data kept solely for an evaluative purpose; and
* Document related to a prosecution if all proceedings related to the prosecution have not been completed.

Please complete this personal data correction form and submit it in person or by post, or email to:

|  |  |
| --- | --- |
| Address: |  |
| Sergent Services Pte Ltd | Tel: 6570 6733 |
| 1 Ubi View |  |
| #04-23 Focus One | Email: sergent@singnet.com.sg |
| Singapore 408555 |

**Please allow 30 working days for your request to be processed.**

**Upon approval, we will send you an email to inform you about the corrections made to your personal data.**

**Particulars of Requestor**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Requestor: |  | | |
| Email Address: |  | Contact Number: |  |
| Please check the applicable box(es):   I am making correction to my own personal data   I am making a correction on behalf of other individuals(s) | | | |
| Please complete this section if you are making an access request on behalf of other individual(s): | | | |
| Name of other individual(s) whom you are making a correction on behalf of: | | | |
|  | | | |
| Email Address: |  | Contact Number: |  |

**Description of the Personal Data Requested**

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| To enable us to process your access request quickly and efficiently, please provide us with as much information as possible about the personal data you are making correction to. |
|  |

**Other Information**

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| We require verifying your identity before we can disclose the personal data. Please provide a copy of you NRIC/ Passport/ Driving License/ Work Permit/ Employment Pass.  If you are requesting on behalf of another individual, please provide signed authorization letter and a copy of identity proof of the authorizer. |

**Declaration**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| By submitting this form, I confirm that   * the information state above is true, complete and accurate to the best of my knowledge and belief. * A proof of identity and/ or authorization letter has been enclosed. | | | | |
|  |  |  |  |  |
|  | Signature |  | Date |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| For Official Use | | | | |
| Received by: |  | Date: | |  |
| Processed by: |  | Date: |  | |