

**FUJIFILM (MALAYSIA) SDN. BHD.
PERSONAL DATA ACCESS / CORRECTION REQUEST FORM**

Note: For the purposes of this Form:

“PDPA” refers to the Personal Data Protection Act 2010 and its subsequent amendments

“FMAL” refers to FUJIFILM (Malaysia) Sdn. Bhd.

“Data Subject” refers to an individual who is the subject of the personal data

[1] ABOUT YOU (REQUESTOR)

Full Name	
NRIC / Passport Number (To provide Passport Number if the Requestor is not a Malaysian citizen)	
Correspondence Address	
Contact Number	
Email Address	

**[2] ARE YOU REQUESTING FOR YOUR OWN PERSONAL DATA? IF YES, PLEASE
PROCEED TO ANSWER PART (A) BELOW.**

**ARE YOU A THIRD PARTY REQUESTING FOR ACCESS TO SOMEONE ELSE'S
PERSONAL DATA? IF YES, PLEASE PROCEED TO ANSWER PART (B) BELOW.**

PART A (Requesting for your own personal data)

[a] Please state the nature of your relationship with FMAL:

☐ A current* / former* customer of FMAL

☐ A current* / former employee* of FMAL

☐ A current* / former* business associate, vendor, service provider or supplier of FMAL

(* delete where applicable)

[b] Please also provide a photocopy of your National Registration Identification Card (NRIC) or the first page your passport containing your personal details to enable us to verify your identity. Please mark the photocopy of your NRIC or passport with “FOR PERSONAL DATA ACCESS REQUEST ONLY”.

PART B (Requesting for another individual's personal data)

[a] Please provide a photocopy of your National Registration Identification Card (NRIC) or your passport for us to verify your identity and request.

[b] Please state the nature of the relationship of the individual who is the Data Subject with FMAL:

☐ A current* / former* customer of FMAL

- ☐ A current* / former* employee of FMAL
- ☐ A current* / former* business associate, vendor, service provider or supplier of FMAL

(* delete where applicable)

[c] Please describe the nature of your relationship with the Data Subject:

[d] Please state the basis of you requiring the personal data of the Data Subject:

- ☐ Have been authorized by the Data Subject in writing to make this data access request
- ☐ The Data Subject is a minor and I am the parent / legal guardian / having parental responsibility over the Data Subject
- ☐ The Data Subject is incapable of managing his/her affairs and I have been appointed by Court to manage his/her affairs
- ☐ The Data Subject has passed away and I have been appointed as administrator of the Data Subject's estate
- ☐ Other reason (please specify): _____

[e] Please enclose with this Form an authorisation letter from the Data Subject (or Warrant/ Court Order/Power of Attorney as the case may be) as proof of your authority to act on behalf of the Data Subject.

[3] THE PERSONAL DATA SOUGHT

Please provide a description of the personal data requested for. If you also wish to correct the personal data, please describe the relevant corrections to the personal data.

You may also include any relevant additional information which may assist us in providing you with details pertaining to the personal data.

Please specify if you would like to simply view the personal data or to receive a copy of the personal data:

- ☐ View ☐ Copy required

If a copy of the personal data is required, please also indicate the preferred manner of delivery in relation to the personal data:

- ☐ Mailed to the correspondence address as stated above
- ☐ Mailed to the email address as stated above
- ☐ To be collected by you personally at FMAL's corporate office

FMAL reserves the right to charge a reasonable administrative fee for your Access Request as stipulated in the table below.

Type of Personal Data Requested	To View Personal Data Without A Copy	Copy of Personal Data Required
Personal Data	RM 2	RM 10
Sensitive Personal Data* (*Sensitive Personal Data means health information, political opinions, religious beliefs, the commission or alleged commission of an Offence, biometric data)	RM 5	RM 30

**Note: The above payment schedule and obligation shall not be applicable to the current employees of FMAL.*

[4] Declaration

I, _____ hereby confirm that the information given in this Form and any documents enclosed are true and accurate. I understand that it will be necessary for FMAL to verify my / the Data Subject's identity and that FMAL may contact me or the Data Subject for more detailed information in order to locate the information required.

I also understand that any and/or all personal data provided by me in this Form will be collected and processed by FMAL as personal data in accordance with the PDPA.

Signature: _____

Date: _____

Important Notes

- (1) Please note that FMAL reserves the right to restrict access to certain information as may be permitted under the Personal Data Protection Act 2010 (and its subsequent amendments).
- (2) Please enclose the payment slip with your Access Request, failing which FMAL may not be able to process your Access Request.

For FMAL Use Only

Form Received By Name: Date:	Response Sent Date:
Remarks:	