

## Guide for making a Withdrawal of Consent Request

### For the purpose of this form:

- a Data Subject is an individual who is requesting withdrawal of consent given earlier with respect to processing of his/her personal data; and
- a Third Party Requestor is another individual/entity that is requesting to withdraw the consent previously provided by a Data Subject in relation to the processing of his/her own personal data.

### Sections to fill:

- Sections applicable to requests made by Data Subject personally: 1, 2, 3, 5 & 6
- Sections applicable to requests made by Third Party Requestor on behalf of Data Subject: 1, 2, 4, 5 & 6

### Supporting documents required:

- For Data Subjects – copy of the National Registration Identification Card (NRIC) or passport bearing signature of Data Subject.
- For Third Party Requestors (Individual) - copy of the NRIC or passport bearing signature of Third Party Requestor as well as documents evidencing the right/authority of the Third Party Requestor to the information of the Data Subject.
- For Third Party Requestors (Entity) – certified true copies of identity of Third Party Requestor as well as documents evidencing the right/authority of the Third Party Requestor to the information of the Data Subject.

### Compliance with request:

- Please note that we will not be able to comply with your request in certain circumstances, e.g. where we are not able to verify your identity or similar requests have been received repetitively. However, we will notify you of any such decision.

# PERSONAL DATA WITHDRAWAL OF CONSENT REQUEST FORM ("PD3")



## SECTION 1: NATURE OF RELATIONSHIP

Please state the nature of your relationship with us (please tick [✓] one of the following):

- ☐ I am an employee/former employee of Lion Group  
(You may skip Section 4 of this form)
- ☐ I am a current/former customer, client, business associate, vendor service provider or supplier of Lion Group  
(You may skip Section 4 of this form)
- ☐ I am making a request for personal data of another person  
(You may skip Section 3 of this form)
- ☐ Others – and a Data Subject myself (Please specify)  
(You may skip Section 4 of this form) \_\_\_\_\_

## SECTION 2: LION GROUP OF COMPANIES

Please tick [✓] on the relevant Corporate Office/Operating Companies from whom you are withdrawing your consent:

Corporate Office / Group Functions	Services / Retail / Trading / Hospitality
<input type="checkbox"/> Corporate Communication <input type="checkbox"/> Corporate Planning <input type="checkbox"/> Legal / Company Secretarial <input type="checkbox"/> Insurance <input type="checkbox"/> Treasury <input type="checkbox"/> Human Resource	<input type="checkbox"/> Secom (Malaysia) Sdn Bhd <input type="checkbox"/> CeDR Corporate Consulting Sdn Bhd <input type="checkbox"/> Lion Petroleum Products Sdn Bhd <input type="checkbox"/> Posim Marketing Sdn Bhd <input type="checkbox"/> Brands Pro Management Sdn Bhd
<b>Steel</b>	
<input type="checkbox"/> Amsteel Mills Sdn Bhd / Amsteel Mills Marketing Sdn Bhd <input type="checkbox"/> Bright Steel Sdn Bhd <input type="checkbox"/> Lion Steelworks Sdn Bhd <input type="checkbox"/> Megasteel Sdn Bhd	<input type="checkbox"/> Lion DRI Sdn Bhd <input type="checkbox"/> Secomex Manufacturing (M) Sdn Bhd <input type="checkbox"/> Singa Logistics Sdn Bhd <input type="checkbox"/> Antara Steel Mills Sdn Bhd
<b>Property</b>	<b>Manufacturing</b>
<input type="checkbox"/> Lion Group Property Division	<input type="checkbox"/> Likom Caseworks Sdn Bhd <input type="checkbox"/> Likom CMS Sdn Bhd
<input type="checkbox"/> Others (to specify) :	

## SECTION 3: DATA SUBJECT (To be filled by Data Subject)

\*Full name (as per NRIC): \_\_\_\_\_

\*NRIC/Passport No :

(Copy to be attached)

Office phone: \_\_\_\_\_

\*Mobile phone: \_\_\_\_\_

\*e-mail: \_\_\_\_\_

Name of Officer/Department previously dealt with : \_\_\_\_\_

\* (mandatory fields)

# PERSONAL DATA WITHDRAWAL OF CONSENT REQUEST FORM ("PD3")



## SECTION 4: THIRD PARTY REQUESTOR (To be filled by Third Party Requestor)

This request is based on the following capacity (please tick [✓] one of the following):

- ☐ I am acting under the Data Subject's authorisation/mandate/Power of Attorney
- ☐ I am the legal/personal representative of the Data Subject
- ☐ I have a Warrant/Court Order allowing access to the Data Subject's personal data
- ☐ I am the executor/administrator of the Data Subject's estate
- ☐ Others (please specify)

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*\*Please enclose proof of your authority to access the personal data of the Data Subject. You must ensure that the document has been certified by a Commissioner for Oaths, a Notary Public or an Advocate Solicitor.*

### A) Particulars of Data Subject

\*Full Name (as per NRIC): \_\_\_\_\_

\*NRIC/Passport No. : \_\_\_\_\_  
(Copy to be attached)

Name of Officer/Department previously  
dealt with by Data Subject: \_\_\_\_\_

### B) Particulars of Third Party Requestor

\*Full Name (as per NRIC): \_\_\_\_\_

\*NRIC/Passport No. : \_\_\_\_\_  
(Copy to be attached)

Requestor's relationship  
with Data Subject: \_\_\_\_\_

Name of Company/Firm/Agency:  
(If the Third Party Requestor is a non-individual) \_\_\_\_\_

Company Registration No.: \_\_\_\_\_

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

Address Line 3: \_\_\_\_\_

Address Line 4: \_\_\_\_\_

Town/City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Office phone: \_\_\_\_\_ \*Mobile phone: \_\_\_\_\_

\*Email: \_\_\_\_\_

*\* (mandatory fields)*

# PERSONAL DATA WITHDRAWAL OF CONSENT REQUEST FORM ("PD3")



## SECTION 5: WITHDRAWAL OF CONSENT

Please tick [✓] to select the appropriate options:

Purposes	Consequences
<input type="checkbox"/> <b>Advertisement &amp; Promotion</b> I <b>wish to withdraw my consent</b> to receive advertisement & promotion information sent to me via the following mode of communications: <input type="checkbox"/> Voice Calls <input type="checkbox"/> SMS/MMS/Social App <input type="checkbox"/> Facsimile <input type="checkbox"/> Post	Promotional information of products, services, offers and events provided by us will no longer be sent to you via the modes of communication which you have selected.  Note: Your request will take effect within 21 days from the date of receipt.
<input type="checkbox"/> <b>Marketing/Research</b> I <b>wish to withdraw my consent</b> for my personal data to be collected, used and disclosed for Research/ Marketing Purpose as described in the Group's or Company's Privacy Notice	Any data that can identify you as an individual will no longer be used for any market research, survey and data analysis.  Note: Your request will take effect within 21 days from the date of receipt.
<input type="checkbox"/> <b>Other Purposes</b> I <b>wish to limit the processing</b> of my personal data (or the Data Subject's personal data on whose behalf this request is made)	(Please provide your detailed request here) <i>Attach additional sheets if necessary.</i>

# PERSONAL DATA WITHDRAWAL OF CONSENT REQUEST FORM ("PD3")



## SECTION 6: DECLARATION

I/We, \_\_\_\_\_ hereby certify that the information given in this form and any document submitted/enclosed are true and accurate. I/We understand that:

- i. It will be necessary for you to verify my/our/the Third Party Requestor's identity, and
- ii. That you may contact me/us for more detailed information in order to process the request to withdraw consent.

I/We also understand that any and/or all personal data provided by me/us in this Personal Data Withdrawal of Consent Request Form will be collected and processed by you as personal data in accordance with the Personal Data Protection Act, 2010.

Signature :

\_\_\_\_\_

Date :

\_\_\_\_\_

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INTERNAL/OFFICE USE ONLY							
	P-I-C	P-I-C	P-I-C	P-I-C	Reviewer	P-I-C	Reviewer
	Received by	Completed/ Declined/ Pending	Reasons for declining/ pending resolution	Remarks (with action plan where required)	Approved by/ Rejected by	Resolved by/ not able to resolve by	Approved by/ Rejected by
Signature							
Name							
Date							