

**FORM 4  
THE DATA  
PROTECTION  
ACT, 2020**

**NOTICE TO PREVENT  
AUTOMATED DECISION TAKING**

Under sections 12(2) and 12(3)(b) of the Act

Reference no: ..... (For Internal Use Only)

**▶ 1. Data Controller:** (Please state the name and address of the data controller to whom the application is being directed)

Name: .....  
Address: .....

**▶ 2. Name of Data Subject:** (Print)

Last: ..... First: ..... Middle: .....

**▶ 3. Name of Applicant:** (If acting on behalf of a data subject) (Print)

Last: ..... First: ..... Middle: .....

**▶ 4. Date of birth (of data subject):**

**▶ 5. Sex (of data subject):** Male  Female

(DD/MM/YYYY)

Address: .....

**▶ 6. Please indicate the address to which correspondence related to your application should be sent**

Home: ..... Mailing: .....  
.....  
.....  
Telephone: ..... Telephone: .....  
Email: ..... Other: .....

**▶ 7. I hereby require you:**

to ensure that no decision taken by or on your behalf and which significantly affects me/the data subject on whose behalf I am acting, is based solely on the processing, by automatic means, of my personal data/the data subject's personal data for the purpose of evaluating matters relating to me/the data subject.

in relation to your notice of ..... (insert date DD/MM/YYYY) in respect of, and which significantly affects, me/the data subject, to reconsider the decision made by you or on your behalf or make a new decision, otherwise than by automated means.

Signature of data subject/applicant: ..... Date: .....  
(DD/MM/YYYY)

**Note:** Please submit any documents/evidence in support of the application.