FORM 4

APPLICATION FOR THE CONSENT OF A DATA SUBJECT FOR THE PROCESSING OF PERSONAL INFORMATION FOR THE PURPOSE OF DIRECT MARKETING IN TERMS OF SECTION 69(2) OF THE PROTECTION OF PERSONAL INFORMATION ACT, 2013 (ACT NO. 4 OF 2013)

REGULATIONS RELATING TO THE PROTECTION OF PERSONAL INFORMATION, 2018 [Regulation 6]

TO: African Oxygen Limited

Grayston Office Park, Building 7

128 Peter Road, Sandown

Sandton, 2196

(Name of data subject)

FROM: __________________________________________

________________________________________

________________________________________

________________________________________

Contact number(s): __________________________________________

Fax number: __________________________________________

E-mail address: __________________________________________

(Name, address and contact details of responsible party)

Full names and designation of person signing on behalf of responsible party:

________________________________________________________________________

...........................................................................................................

Signature of designated person

Date: ________________

PART B

I, __________________________________________ (full names of data subject) hereby:

[ ] Give my consent (subscribe) [ ] Select to unsubscribe

To receive direct marketing of goods or services to be marketed by means of electronic communication.
SPECIFY GOODS or SERVICES: Afrox provides engineering services and a focused range of Atmospheric Gases, welding and safety products and LPG to valued customers, through excellence in operations, customer service, product delivery, and investment in infrastructure, employees and technology for the benefit of all stakeholders. Offering customers and product or services within this offering, will be considered as similar products and services.

SPECIFY METHOD OF COMMUNICATION:

PHONE: ..................................................

E-MAIL: ..................................................

SMS: ..................................................

OTHERS (SPECIFY): Communications with Afrox Sales team.

OTHERS (SPECIFY): ..................................................

Signed at .......................................... this ...................... day of ......................... 20............

..............................

Signature of data subject

Forward the completed form to COM.Resources.email@afrox.linde.com