Application for Correction of Personal Information Form

This form has been prepared to assist you in applying for correction of personal information about you held by Zinfra Pty Ltd (ABN 98 156 517 305) and its wholly owned subsidiaries. Under the Privacy Act, you have the right to request correction of information that is inaccurate, incomplete or out of date.

We ask that you use this form to help us locate the personal information that you want corrected. Please provide all of the requested information, attaching additional pages if you require more space for your responses.

If you prefer not to use this form, please provide the information requested in some other legible written format (for example, an email, fax or letter), to the return address detailed below.

**Note that you may only apply for correction of your own personal information. You may not apply for correction of another person’s personal information (although parents of minors, legal guardians and those with legal authority may request correction on behalf of their children or wards). If you are requesting correction on behalf of another person, you must provide proof of your authority to do so.**

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| **Your Contact Details** |
| Title (Mr/ Mrs/Miss/ Ms): |  |
| Full Name:*(Include your current name and any former names in which you believe we may hold information about you)* |  |
| Address: |  |
| Email: |  |
| Contact Telephone Number (during normal business hours): |  |

*Please advise us as soon as possible if any of your contact details change.*

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| **REQUEST FOR CORRECTION** |
| **By:***(Provide name of Zinfra entity or business unit if known)* |  |
| **Amendment requested:***(Specify the information that you believe to be inaccurate, incomplete or out-of-date and the amendment that you consider needs to be made to correct the information).* |  |
| **Reasons:***(Specify the reasons why you believe the information we hold is inaccurate, incomplete or out-of-date and attach any supporting information).* |  |

Before we can change your personal information, we must be satisfied of your identity. Please provide evidence of your identity, such as a driver’s licence or passport. If you are correcting this information on behalf of someone else, please provide written evidence that you are authorised to correct the information on their behalf. You will also need to provide evidence of the identity of the individual who has authorised you to correct the information as well as proof of your own identity.

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| C**onfirmation** |
| I confirm that this complaint relates to a breach of the Privacy Act 1988 pertaining to personal information about me (or about a person that has authorised me to lodge this complaint on their behalf): |
| Signed: |  |
| Print name: |  |
| Date: |  |

When you have completed this form please return it by mail, email, or fax to:

Privacy Officer
Zinfra Pty Limited
Level 26, 303 Collins Street
Melbourne, VIC 3000
Fax: (03) 9614 4745
Email: privacyenquiries@zinfra.com.au

Collection Statement

We will use the information that you provide in this form only for the purpose of responding to your request for access. We will usually disclose your request to the area within the relevant business unit of Zinfra where your information is held and, if necessary, to other members of that company who are required to assist in addressing your complaint, or where disclosure is required by law.