WITHDRAWAL OF CONSENT FORM			
PERSONAL DETAILS			
Name :			
Address :			
Email :		Telephone / Mobile No :	
REMARKS (If any)			
IMPORTANT INFORMATION			
Please attach a copy of : (a) your NRIC or passport so that we can verify your identity before processing your request (b) a valid power of attorney authorising you to make this withdrawal of consent if you are making this withdrawal request in respect of another person's personal data.			
Please note that to process this withdrawal request, the information in this form may need to be given to third parties or our affiliated companies.			
By default, your request will be treated as a full withdrawal of your consent concerning your personal data (i.e. for its collection, use and disclosure). Please indicate clearly in the Form if you do not wish to withdraw your consent for us to (i) collect; or (ii) use; or (iii) disclose, any of your data.			
The Data Protection Officer will contact you via email if more information is required to process your request. Upon sending your request, please allow us a reasonable period of time from receipt of your request for processing. During this period, you may continue to receive correspondence from us. We will be entitled to act on this request without reconfirming that you wish to proceed with your request.			
Please send this completed withdrawal request form (attaching the required supporting documents) to : - by email : dpo@thakralcorp.com.sg; or - by post : Data Protection Officer Thakral Corporation Ltd & its Singapore subsidiaries and associated companies 20 Upper Circular Road #03-06 The Riverwalk Singapore 058416			
Signature :	: Date :		