**DATA PROTECTION AUTHORITY OF ZIMBABWE**



# APPLICATION FORM

**REGISTRATION & LICENCING AS A DATA CONTROLLER**

*Note: Before filling out this application form, consult the registration guide available on* [*www.potraz.zw*](http://www.potraz.zw)

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| SECTION 1 – APPLICANT DETAILS | | | |
| OPERATIONAL DETAILS | | | |
| Entity Name: | | | |
| Registration Number (if applicable):  ……………………………………. | | License Number (if applicable):  ……………………………………. | Data Controller Category or Class Tier:  ……………………………………… |
| NATURE OF ENTITY | | | |
| *Tick as appropriate*  ☐ Public / Government Dpt ☐ Private ☐ NGO ☐ Faith Based organisation ☐ Political organisation ☐ Other: | | | |
| Entity Sector |  | | |
| Entity Address: |  | | |
| Phone Number: |  | | |
| Email Address: |  | | |
| Website: |  | | |
| NAME OF DESIGNATED DATA PROTECTION OFFICER | | | |
| Name: |  | | |
| Phone Number: |  | | |
| Email Address: |  | | |
| **REPRESENTATIVE IN ZIMBABWE** *(if the applicant is established outside of Zimbabwe)* | | | |
| Name: |  | | |
| Phone Number: |  | | |
| Address: |  | | |
| Email: |  | | |
| Website: |  | | |

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|  | SECTION 2 – PERSONAL DATA | | |  |
| **CATEGORY OF**  **DATA SUBJECTS**  (e.g., employee,  client, supplier, or shareholder, students, patients, etc) | **DESCRIPTION OF**  **PERSONAL DATA**    (e.g., name, address, or national registration  number,etc) | **PURPOSE OF**  **PROCESSING**    (e.g., service provision,  HR management, invoicing, Know Your  Customer (KYC), etc). | **CATEGORY OF**  **RECIPIENT(S) TO**  **WHOM**  **PERSONAL DATA**  **IS DISCLOSED**  (e.g., Regulators, Partners, Investors, Processor, etc.) | **GROUND FOR**  **PROCESSING**    (Tick as appropriate) |
|  |  |  |  | ☐ Consent of data subject  ☐ Contractual necessity  ☐ Legal obligation  ☐ Vital interests of the data subject or other person  ☐ Public interest  ☐ Performance of  duties of a public entity  ☐ Legitimate interest  ☐ Research upon  authorization |

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| SECTION 3 – CATEGORIES OF SENSITIVE PERSONAL DATA | | |
| ☐ **Applicable** ☐ **Not Applicable** (Tick as appropriate)  **If applicable, please fill in the below details otherwise proceed to section 4.** | | |
| **PLEASE SELECT THE TYPE(S) OF**  **SENSITIVE PERSONAL DATA**  **YOU PROCESS**  (Tick as appropriate) | **SPECIFY PURPOSE(S) FOR**  **PROCESSING SENSITIVE**  **PERSONAL DATA** | **GROUND FOR PROCESSING**    (Tick as appropriate) |
| ☐ Person’s race |  | ☐ Consent of data subject  ☐ Obligations of the data controller/ data processor or exercising specific rights of the data subject  ☐ Vital interests of the data subject or other person  ☐ Preventive or occupational medicine, public health  ☐ Archiving, scientific, and historical research or statistical purposes |
| ☐Social origin |  |
| ☐ Genetic or biometric information |  |
| ☐ Political opinion |  |
| ☐ Health status |  |
| ☐ Criminal records |  |
| ☐ Religious or philosophical beliefs |  |
| ☐ Sexual life or family details |  |
| ☐ Medical records |  |

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| SECTION 4 – DATA PROCESSOR'S INVOLVEMENT | |
| ☐ **Applicable** ☐ **Not Applicable** (Tick as appropriate)  **If applicable, please list your Data Processors and fill in the details below, otherwise proceed to section 5.** | |
| **NAME OF DATA PROCESSOR(S)** | **DO YOU HAVE WRITTEN DATA PROCESSING CONTRACT(S) WITH THE DATA PROCESSOR(S)?** |
|  | ☐ **YES** ☐ **NO (**Tick as appropriate) |

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| SECTION 5– TRANSFER OF PERSONAL DATA OUTSIDE ZIMBABWE |
| ☐ **Applicable** ☐**Not Applicable** (Tick as appropriate)  **If applicable, please list the countries in the section below, otherwise proceed to section 6** |
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***Note:*** *You will need to apply for a separate authorization to transfer personal data outside of Zimbabwe and to provide data sharing agreements.*

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| **SECTION 6 – MEASURES FOR PROTECTION OF PERSONAL DATA** | |
| **RISKS TO PERSONAL DATA**  (e.g., unauthorized access/disclosure, or theft.) | **SAFEGUARDS, SECURITY MEASURES AND MECHANISMS**  **IMPLEMENTED TO PROTECT PERSONAL DATA**  (e.g., access control, visitors’ logbook, encryption or other information security measures.) |
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**Do you store personal data outside of Zimbabwe?** ☐ **YES** ☐ **NO (**Tick as appropriate)

*If* ***YES****, you need to apply for a separate authorization to store personal data outside of Zimbabwe.*

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| SECTION 7 – ACCOMPANYING DOCUMENT CHECKLIST | |
| **DOCUMENT TYPE** | **INDICATE BY A TICK OR ‘X’ WHERE APPLICABLE TO SHOW THAT THE DOCUMENT IS SUBMITTED OR NOT.** |
| Certificate of incorporation | ☐ |

**I certify that the above information is correct and complete and hereby apply to be registered as a Data Controller under the Cyber & Data Protection Act [Chapter 12:07] of 2021 and Statutory Instrument … of 2024, Cyber and Data Protection Regulations relating to the protection of personal data and privacy.**

Signature: Date:

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Name:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(\*Applicant / Person authorized to sign on behalf of Applicant)

**FOR OFFICE USE ONLY**

Fee Class/ Tier:……………………….. Total Fee:…………………….Receipt No:………..……………………

License/ Registration Number:………………………………………………………………………………………

Recommending Officer:…………………………………...........................Date:..…………………………………

Reviewing Officer:…………………………………………………………Date:………………………………….

Approving Officer:...……………………………………………………….Date:……………………………….....

Comment(s):…...………………………………………………….…………………………………………...……

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