

# LOYAR TECHNOLOGY AND GOVERNMENT SERVICES PLC

## PERSONAL OR BUSINESS DATA CONSENT FOR THIRD-PARTY FORM

### SECTION A: DATA SUBJECT INFORMATION


Full Name / Business Name: \_\_\_\_\_


National ID or Passport ID/ \_\_\_\_\_


Business Registration Number: \_\_\_\_\_


Contact Information:  Email Address \_\_\_\_\_

 Phone Number \_\_\_\_\_

Address / Business Location:  Nationality \_\_\_\_\_


 Province/State \_\_\_\_\_

 District/City \_\_\_\_\_

 Other Address \_\_\_\_\_

Authorized Representative (If applicable): Names: \_\_\_\_\_

Relationship to Data Subject (If applicable): \_\_\_\_\_

Authorized Representative Contact Information:  Phone Number \_\_\_\_\_

### SECTION B: DATA CONSENT DETAILS

**Type of Data to be Shared:** (Tick where applicable)

- ☐ Personal Data
- ☐ Business Data
- ☐ Both Personal & Business Data

### Purpose of Data Sharing: (Tick where applicable)

- ☐ Service Provision
- ☐ Compliance with Legal Obligations
- ☐ Customer Support
- ☐ Recruitment process
- ☐ Tender (Procurement)
- ☐ Public Interest
- ☐ Academic Registration
- ☐ Shareholder Registration
- ☐ Known your Customer (KYC)
- ☐ Marketing and Promotions
- ☐ Other (Specify): \_\_\_\_\_

### Data Authorized for Use: (Specify details of data being shared)

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### Authorized Third-party Information

Third-Party Full Name: \_\_\_\_\_

Destination (If Applicable): \_\_\_\_\_

Third-party Type:

- ☐ LTGS Agent
- ☐ LTGS Partner
- ☐ Legal Entity
- ☐ Other (Specify) \_\_\_\_\_

Contact Information:

☐ Email Address: \_\_\_\_\_

☐ Phone Number: \_\_\_\_\_

Physical Address (Location):

☐ Nationality: \_\_\_\_\_

☐ Province/State: \_\_\_\_\_

☐ District/City: \_\_\_\_\_

☐ Other Address: \_\_\_\_\_

## SECTION C: CONSENT & DECLARATION

### Consent Declaration:

- ☐ I hereby grant LTGS Rwanda Plc and its authorized agent permission to collect, process, and use my personal/business data solely for the specified purpose(s) above.
- ☐ I acknowledge that my data will be handled securely and in compliance with Rwanda's Personal Data Protection and Privacy Law.
- ☐ I understand that I have the right to withdraw this consent at any time by notifying LTGS Rwanda Plc in writing.

### Data Subject's Signature

SUBJECT'S FULL NAMES	ISSUED DATE	SIGNATURE
	____/____/____	

### FOR OFFICIAL USE ONLY

THIRD-PARTY NAMES	DESTINATION	ISSUED DATE	SIGNATURE
		____/____/____	
RECEIVED BY	POSITION	RECEIVED DATE	SIGNATURE
		____/____/____	

### Comments :

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