Procedures to Claim for the Removal of Computer Data from Computer System (Take Down Notice)

A Claimant who wishes to ask SCG to discontinue the proliferation of certain computer data or to remove such computer data which is deemed to constitute a computer offence under Section 14 of Computer-related Offences Act B.E. 2550, as amended by Computer-related Offences Act (No.2) B.E. 2560, from a computer system of SCG shall contact and personally submit a Complaint Form together with Supporting Documents (including Additional Supporting Documents, where applicable) to the person-in-charge at Enterprise Brand Management Office of SCG, Corporate Headquarters Building 2 Floor 1, 1 Siam Cement Road, Bangsue, Bangkok 10800 Thailand.

Only after the submission of the aforesaid Complaint Form and Supporting Documents (including Additional Supporting Documents, where applicable) shall the Company initiate the proceedings to discontinue the proliferation of the aforementioned offending computer data or to remove such offending computer data from its computer system. All copies of the documents must be certified true by the Claimant and shall be submitted to the person-in-charge in person.

**List of Supporting Documents**

- Complaint form as stipulated by SCG
- Daily report or complaint report submitted to inquiry official or police officer (original)
- Identity card or government-issued card bearing the corresponding identification number of the Claimant (copy)
- Evidence showing change to name-surname (if any)
- Document or evidence submitted to inquiry official or police officer
- Other documents or evidence showing details of computer offence under Section 14 and damage to any user or third-party

**Additional Supporting Documents** *(in case the claimant is not present in person)*

- Power of attorney
- Copy of identity cards or government-issued cards bearing the corresponding identification number of the Claimant and his/her attorney

The attorney shall show his/her original identity card to the person-in-charge.
 Complaint Form

1. Details of the Claimant
Name: ___________________________ Surname: ___________________________ Age: __________
Gender: [ ] Male [ ] Female Occupation: ___________________________ Identification No.: ___________________________
Address: ____________________________________________________________________________________________
Mobile No.: ___________________________ E-mail: ___________________________

2. Details of the Offence
2.1 Account name/Name of owner of offending computer data/Name of possessor of offending computer data
__________________________________________________________________________________________________________________________________________________________
2.2 Location of offending computer data (URL) _____________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________
2.3 Details of conduct and form of one or more of the following offences (more information can be added as an attachment).

  • Dishonestly or by deceit, bringing into a computer system a computer data which is distorted or fake, whether in whole or in part, or a computer data which is false, in a manner likely to cause damage to the public, provided that such offence is not an offence of defamation under the Penal Code.

  • Bringing into a computer system a computer data which is false in a manner likely to cause damage to maintenance of national security, public security, national economic security or an infrastructure involving national public interest or in a manner causing public anxiety.

  • Bringing into a computer system any computer data which constitutes an offence relating to security of the Kingdom or an offence relating to terrorism under the Penal Code.

  • Bringing into a computer system any computer data of a pornographic nature, provided that such computer may be accessible by the general public.
__________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________
__________________________________________________________________________________________________________________________________________________________

Person-in-charge: ___________________________ Date-Time: ___________________________
3. Details of damage to the Claimant or third party (more information can be added as an attachment).


4.1 Date of complaint report/daily report

4.2 Police station

4.3 Name of inquiry official or police officer

5. List of submitted documents (Please select the document submitted with the Complaint Form by writing √ in the box).

- Complaint form as stipulated by SCG
- Daily report or complaint report (original)
- Identity card or government-issued card bearing the corresponding identification number of the Claimant
- Evidence showing change to name-surname (if any)
- Document or evidence submitted to inquiry official or police officer
- Other documents or evidences showing details of computer offence under Section 14 and damage to user or third party (if any, please specify)

Additional Supporting Documents (In case the Claimant is not present in person).

- Power of attorney
- Copy of identity cards or government-issued cards bearing the corresponding identification number of the Claimant and the attorney
I hereby certify that all information stated in the form and all supporting documents attached hereto are correct and true. In case it is verified that the information, documents or any of the evidences is not correct or true, I accept all liabilities resulting therefrom.

I acknowledge that SCG will make a copy and send the information and supporting documents to users, members or relevant parties under control of SCG in accordance with statutory procedure.

Signature .................................................. Claimant

( .................................................. )

Date..........................................................

Remarks:

*SCG reserves the right to take no action where the Claimant incorrectly or incompletely fills in the information or submits supporting documents.

**SCG shall not be responsible for any damages or cost and expense incurred, directly or indirectly, as a result of the submission of this claim.