



Data Subject Access Request

If you are making this request on the data subject's behalf, you should provide your name and contact information on page 3

We will only use the information you provide on this form to identify you and the personal data you are requesting access to, and to respond to your request.

Requester Name (Data Subject) and Contact Information

| | |
|---|--|
| First and last name: | |
| Any other names that you have been known by (including nicknames): | |
| Home address: | |
| Date of birth: | |
| Telephone number: | |
| E-mail address: | |
| If you are a current or former employee of Passle Ltd., please provide your approximate dates of employment | |
| Please provide us sufficient information to help us locate your personal data | |

Signature and Acknowledgement

I, _____, confirm that the information provided on this form is correct and that I am the person whose name appears on this form.



I understand that:

- Passle Ltd must confirm proof of identity and may need to contact me again for further information
- My request will not be valid until Passle Ltd receives all of the required information to process the request;
- I am entitled to one free copy of the personal data I have requested, and acknowledge that for any further copies I request, Passle may charge a reasonable fee based on administrative costs.

If you would like to receive a copy of the personal data you are requesting access to, please indicate below whether you would like a hard copy or an electronic copy:

- Hard copy.
- Electronic copy.



Requests made on a Data Subject's Behalf

Please complete this section of the form with your name and contact details if you are acting on the data subject's behalf.

| | |
|----------------------|--|
| First and last name: | |
| Home address: | |
| Date of birth: | |
| Telephone number: | |
| E-mail address: | |

Consent of data subject and Acknowledgement

I, _____, confirm that the information provided on this form is correct and that I have authorised _____ to act on my behalf.

Authorised Person Signature

I, _____, confirm that I am authorised to act on behalf of the data subject. I understand that Passle must confirm my identity and my legal authority to act on the data subject's behalf, and may need to request additional verifying information.

Signature