**DATA SUBJECT REQUEST FORM**

This form should be used to submit a data subject request in compliance with Section 26 of the Data Protection Act, 2019 and Regulation 8 of the General Regulations, 2021.

**1. Customer Details**

|  |  |
| --- | --- |
| **Name:** |  |
| **ID Number:** |  |
| **Customer/Account**  **Number:** |  |

**2. Type of Data Subject Request**

Please select the type of request you are making:

|  |  |
| --- | --- |
| ☐ | **Access request** |
| ☐ | **Rectification of Personal Data** |
| ☐ | **Personal data portability request** |
| ☐ | **Erasure of personal data** |

|  |  |
| --- | --- |
| ☐ | **Restriction of processing of personal data** |
| ☐ | **Request regarding automated decision making and profiling** |
| ☐ | **Objection to processing of personal data** |
| ☐ | **Consent withdrawal** |

|  |
| --- |
| ☐ **Bank Statement** ☐ **Loan Statement** ☐**Personal information** ☐ **Product/Service Information** |

**4. Request reason/justification**

|  |
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**5. Preferred Response Channel**

|  |  |
| --- | --- |
| ☐ **Email**  ☐ **Telephone** | ☐ **Formal Letter - Pick up at our Office** |

**6. Declaration**

I confirm that the information provided here is accurate and the request is in accordance with the data protection laws and regulations. I acknowledge that any attempt to mislead may result in prosecution.

|  |  |
| --- | --- |
| **Signature:** |  |
| **Date:** |  |

Once completed, this form should be submitted via email to dataprotection@cibke.com or posted to:

**COMMERCIAL INTERNATIONAL BANK (CIB) KENYA LIMITED  
 HEAD OFFICE – KAM House Mezzanine Floor, Opposite Westgate Mall, Mwanzi Road, Westlands  
 P. O. Box 2051-00606, Sarit Centre, Nairobi, Kenya  
 +254(0)709 063 000/1032 Mobile: +254 711 123 210  
**[**dataprotection@cibke.com**](mailto:dataprotection@cibke.com) ** www.cibke.com**

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