**FORM 1: REQUEST TO ACCESS PERSONAL DATA**

Upon your request and subject to applicable laws, LBKM will provide you with:

* Your personal data that is in its possession or under its control; and
* Information about the ways in which your personal data has been or may have been used or disclosed by it in the past year prior to the date of your request.

Please note that LBKM may charge a reasonable fee for access requests to recover any associated incremental costs of responding to the access request. Non-payment or non-receipt of your payment of the fee may result in LBKM’s inability to process your access request.

Please ensure that you have provided LBKM with all the details requested in this form. The details requested in this form are necessary for LBKM to process your access request. Any inaccuracies, errors or omissions in the details provided may result in delays and/or LBKM’s inability to process your request.

**APPLICANT’S PERSONAL PARTICULARS**

|  |  |
| --- | --- |
| Full name (as reflected in NRIC): |  |
| Residential address: |  |
| Email address: |  |
| Contact number: |  |

**NATURE OF REQUEST**

Please tick the most appropriate box (can be more than one):

* I wish to know about the ways my personal data has been or may have been used or disclosed by LBKM in the past year prior to the date of this request.
* I wish to access all of my personal data.
* I wish to access some of my personal data.

*Please specify in the box below the details of the personal data you wish to access.*

|  |
| --- |
|  |

**DECLARATION**

I declare that the information provided in this form is true and correct and that this request relates to my own personal data. I confirm that the information provided in this form may be collected, used and disclosed by LBKM for the purposes of processing this request and/or in accordance with its data protection policy.

I further confirm that I have been notified that I may be required to pay a reasonable fee to LBKM in order for it to process my access request.

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

 (Signature) (Date)

|  |
| --- |
| **For official use only** |
| Received by: | Date: |
| Processed by: | Date: |