



## Melli Bank Plc Subject Access Request/ Right to Erasure Form

1. DATA SUBJECT DETAILS	
Title (e.g. Mr, Mrs, Ms, Miss or Other )	
Surname	
First Name(s)	
Current Address	
Telephone number (Home)	
Telephone number (Work)	
Telephone number (Mobile)	
Email address	
Date of Birth	
Means of identification provided to confirm name of data subject	
Details of data requested:	

2. DETAILS OF PERSON MAKING A REQUEST	
Are you acting on behalf of the data subject with their [written] or other legal authority?	Yes <input type="checkbox"/>  No <input type="checkbox"/>
If 'Yes' please state your relationship with the data subject (e.g. parent, legal guardian or solicitor or authority)	
Please enclose proof that you are legally authorised to act on their behalf	
Title (e.g. Mr, Mrs, Ms, Miss or Other )	
Surname	
First Name(s)	
Current Address	
Telephone number (Home)	
Telephone number (Work)	
Telephone number (Mobile)	
Email address	

**DECLARATION**

**Please delete as appropriate**

I, ....., the signatory and person identified above as the data subject, hereby request that Melli Bank Plc 'provide me with the personal data about me identified above'/erase all the personal data'.

**Signature:**

**Date:**

**For Melli Bank Plc Internal Use only**

Date the SAR was received	
Department that SARS is to be actioned	
Completion date of SAR	
Signature of department manager who actioned SAR ( Date of Signature )	
Signature of Head of Compliance ( Date of Signature )	
Signature of Chief Corporate Affairs Officer ( Date of Signature )	