

## DATA RECTIFICATION REQUEST FORM

### Note to Requestor

1. We rely on your personal details provided below to be complete and accurate to be able to process this request.
2. If the request is made by an individual other than the Data Subject, please also submit the following documents:
  - (a) A legally authenticated and registered Power of Attorney. If drawn abroad, it must be legalised by Apostille and relevant formalities; and
  - (b) Proof of identity of the Data Subject, for example, copy of the national identity card or a valid passport or a birth certificate.
3. Data Subject means an individual who is the subject of the personal data<sup>1</sup>.
4. You may be asked to provide additional information to help us process your request.
5. Upon approval, we will notify you about the rectifications made to your personal data.

### PLEASE COMPLETE IN BLOCK LETTERS

#### A. Details of Data Subject

Name .....  
Surname .....  
NIC Number / Passport Number .....  
Telephone Number .....  
Mobile Number .....  
Address .....  
.....  
.....  
.....  
Email Address .....  
Date of Birth .....

#### B. Details of Requestor Applying for and on behalf of the Data Subject (Where applicable)

Name .....  
Surname .....  
NIC Number / Passport Number .....  
Telephone Number .....  
Mobile Number .....  
Email Address .....  
Date of Birth .....

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<sup>1</sup> 'Personal Data' means any information relating to an identified or identifiable natural person ('Data Subject'); an identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person (Article 4 of the General Data Protection Regulation).

## C. Details of Request

Please state the personal data you are requesting to have corrected or updated.

Change Details	From	To	Customer Initials
Name	.....	.....	.....
Surname	.....	.....	.....
ID Card Number	.....	.....	.....
Category	.....	.....	.....
Mailing Address	.....	.....	.....
Permanent Address	.....	.....	.....
Date of Birth	.....	.....	.....
Marital Status	.....	.....	.....
Other (Please specify below)	.....	.....	.....
.....	.....	.....	.....
.....	.....	.....	.....

## D. Declaration of Requestor

I hereby declare and confirm that all information and supporting documents provided by me in connection with this Rectification Request are true, accurate and complete.

I understand that it will be necessary for SBM Bank (Mauritius) Ltd to verify my identity and I consent to the collection and, use of the personal data that I have provided in this form for the purpose of this Request.

Signature .....  
 Date .....

### For Office Use

Application Reference Number .....  
 Received by / Date .....  
 Referred to / Date .....  
 Fees to be charged (If any) .....  
 Date of Completion of Request .....  
 Request Outcome .....

### Remarks

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