



Your Right to be Forgotten

How to complete the form

1 Please use a **BLACK pen**



2 Mark boxes like this 
If you make a mistake, do this and mark the correct box

3 Please use **BLOCK CAPITAL LETTERS** and leave one space between each word

What you need to know before you fill in this form:

To meet our legal, business and regulatory obligations, we are required to hold your information while you are a customer and for a period after that. To help you understand how long we hold some of your information for, you can visit www.ebs.ie/dataprotection

The Right to Erasure, also known as the Right to be Forgotten, allows you to request that we remove your personal information from our records. Upon request, we will remove your information if one of the following apply:

- your personal information is no longer required for the purpose it was originally collected/processed;
- the processing of your data was based on your consent, which you withdraw and there is no other legal reason for processing your personal information;
- you exercise your right to object and there are no overriding legitimate grounds for the processing;
- your personal information has been processed unlawfully; or
- your personal information needs to be erased to comply with a legal obligation.

Removing your personal information for any of these reasons will not affect your credit history

Please complete the below form if you wish to request the removal of your personal information.

To be completed by customer

If you answer yes to any of the following questions, we may not be able to fully complete your Right to be Forgotten request, however you can still submit your request.

- Do you have an open account or product with us? Yes No
- Did you close your last account or product with us within the last 7 years? Yes No
- Did you make an application for an account or product with us within the last 7 years? Yes No

To help us satisfy your Right to be Forgotten request, please tell us what would you like us to forget?

- What would you like us to forget?
- All information we hold on you
- Information about certain accounts or products (provide details in the box below)

Please provide additional information on the accounts or products you would like to be forgotten.
Please provide account, customer or policy numbers where possible.

To be completed by customer

Please provide us with information relating to your account or profile with EBS. This is required so that we can confirm your identity, and process your request to be forgotten.

All fields marked with * are mandatory.

*First Name	<input type="text"/>
*Last Name:	<input type="text"/>
*Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
*Current Address: (Will be used for correspondence)	<input type="text"/> <input type="text"/> <input type="text"/>
Previous Address:	<input type="text"/> <input type="text"/> <input type="text"/>
Primary Contact Phone No:	<input type="text"/>
Primary EBS Customer No: (if applicable)	<input type="text"/>
Primary EBS Account No: (if applicable)	<input type="text"/>

When you ask us to forget your personal information we will do so on our main customer system. It may take us more time to remove it from other systems, but we will continue to do so on a phased basis. We will no longer be able to process requests from you about the information after we have removed it.

PRINT NAME

CUSTOMER SIGNATURE

DATE

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please note:

- When you ask us to forget your personal information, we will remove your information that we do not need to hold.
- When you are raising a Right to be Forgotten request, we will need proof of your identity.
- Your credit history will not change.
- If you have a joint account with us, we will only be able to remove personal information related to you from the account. To fully forget all personal information relating to this account, all customers on the account must complete their own Right to be Forgotten request.

What happens next?

Once you complete and send us this form, we will assess your request. We will notify you, in writing, of the outcome of your request.

If you are unable to present the form to your local EBS office in person, the completed form can be posted to any EBS office along with a certified original copy of a valid photo ID and a certified proof of address. If you require more information on providing certified copies, you can refer to our website.

We will only use the information you give us on this form for your Right to be Forgotten request.

To be completed by EBS Office Staff Member

Please verify the information that the customer has provided in the form.
Please tick the associated boxes to confirm each field has been provided and is correct.
Leave associated boxes blank if the customer has not provided the information.

Customer First Name provided:

Customer Last Name provided:

Customer Date of Birth provided (DD/MM/YY):

Customer Listed Address provided:

Customer Number / Account Number provided:

Customer has been located on M6:

Customer has provided valid proof of ID (follow existing ID policy):

Type of Customer ID provided:

FOR OFFICE STAFF USE ONLY

Customer ID Satisfactory

Customer Signature Verified

AIB ID Number

Office Staff Signature

EBS Office Name

DATE

Day Month Year
 / /



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