

Ref No...../...../

## Request for exercising personal data protection rights

Details of the data subject	•	
Full names <sup>*1</sup>		
EGN/PNF/date of birth**		identity document No
issued on	issued by	, valid until
permanent address:		
e-mail:		contact phone:
represented by:  legal repr Full names *1		ed power of attorney No///
		identity document No
issued on	issued by	, valid until
permanent address:		
e-mail:		contact phone:
in my capacity as:  Curren	t/former client □ curre	ent/former employee 🛛 other: (please specify)
		lease specify the right you wish to exercise and the elates, so that we can respond to your request.)

<sup>&</sup>lt;sup>1</sup> \*The information will be used so that we may identify and contact you. First Investment Bank AD may request the provision of additional information necessary to verify your identity.

<sup>\*\*</sup>The date of birth is filled in where the requestor does not have EGN/PNF.



I	

## I would like to receive a response to my request:

at my correspondence address:	
at my email address:	
□ at an office of the Bank:	

## Date:

(to be filled in by the Bank)

Within one month of receipt of the request, First Investment Bank AD will notify you of the actions taken in connection with it at the preferred correspondence address/email address/office of the Bank indicated by you. If the number and complexity of requests submitted by you require a more detailed investigation, the period may be extended by a further two months, of which extension you will be notified in due time.

Signature of the requestor: