

RIGHTS EXERCISE FORM

FORM TO REQUEST EXERCISE OF RIGHTS

Date of request:							
INFORMATION ABOUT APPLICANT:							
Surname:		Proof of identity*					
First name:							
Date of birth:		<attach or="" upload=""></attach>					
Identification #:	REF_client_account_						
* Also attach the legal guardian's proof of identity if the application concerns a minor or incapacitated adult.							

METHOD OF COMMUNICATION AND REPLY (CHECK ONLY ONE BOX):

I use an e-mail address for communication and receive replies at my request:	adresse@mail.com
I use another method of	l would like to receiv

communication (specify

I would like to receive a response in the mail at "......"

which):	

RIGHT(S) EXERCISED:							
Data and processing involved							
Grounds	Data involved		Rectification to apply				
Additional documentary proof							
Objecting to processing							
Grounds		Processing involved					
Grounds		Processing involved					
Grounds		Processing involved					
Grounds		Processing involved					
	Grounds Additional documentary prod Objecting to processing Grounds Grounds Grounds	Grounds Data involved Additional documentary proof Objecting to processing Grounds Grounds Grounds	Grounds Data involved Additional documentary proof Objecting to processing Grounds Processing in Grounds Processing in Grounds Processing in				

CA Indosuez

Société anonyme au capital de 584 325 015 euros. RCS Paris 572 171 635. Établissement de Crédit et Société de Courtage d'Assurances, immatriculée au Registre des intermédiaires en assurance sous le n° 07 004 759. 17, rue du Docteur Lancereaux - 75382 Paris cedex 08 - France T : +33 (0)1 40 75 62 62 www.ca-indosuez.com