



FORM GENERAL DATA PROTECTION REGULATION

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Form General Data Protection Regulation

Company: _____

GDPR Personal Data Request Form

Full name:: _____ born on ____ / ____ / ____ declares that, in ____ / ____ / ____, under the terms of General Data Protection Regulation, wants to subject their right to:

☐ Access ☐ Objection ☐ Rectification ☐ Restriction ☐ Portability ☐ Erasure ☐ Withdraw Consent

Your request details:

Contact data

Telephone: _____ Email: _____ Reply address for your request:: _____

Note: this information will only be used to contact the user in respect of this and will be stored for 2 years as an evidence before the supervisory authority (National Commission for Data Protection - CNPD).

I declare that, on the date indicated below, my right was exercised or, if it was not, the reason was explained to me or I was informed that a reply will be given within 10 working days.

Assinatura: _____ Date: ____ / ____ / ____

Receiver data

Signature: _____ Date: ____ / ____ / ____

Comments (to be completed by the services):

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