



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.aib.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

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 box below)

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

To be completed by customer

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

All fields marked with * are mandatory. We require this information to process out your request.

*First Name

*Last Name:

*Date of Birth / /

*Current Address:
(Will be used for correspondence)

Previous Address (in order to help us find you, can you please provide the previous address where you held the closed accounts, if applicable):

*Primary Contact Number (including Area Code):

Primary AIB Sort Code

Primary AIB Account No: (if applicable)

Primary AIB Policy or Card No:(if applicable)

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
 / /

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 branch in person, the completed form can be posted to any AIB branch 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.

FOR BANK USE ONLY

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.

First Name provided:

Last Name provided:

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

Listed Address provided:

NSC / Account provided:

Customer has been located on ClientView:

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

Type of Customer ID provided:

FOR STAFF USE ONLY

Customer ID Satisfactory

Customer Signature Verified

Staff Number

Staff Signature

Branch NSC

DATE

Day Month Year
 / /

Authorised Signature (if applicable)

Authorised Signing Number (if applicable)

