

Request for Access to Personal Data

Note:

- i. All fields marked as * are mandatory
- ii. Documentary evidence in support of this request may be required
- iii. Where the space provided for in this Form is inadequate, submit information as an annexure

DETAILS OF THE DATA SUBJECT

Name*: _____ Phone Number*: _____

Identity Number*: _____ E-mail Address*: _____

Provide the following details where making a request on behalf of a minor or a person who has no capacity

Name*: _____ Relationship to Data Subject*: _____

Phone Number*: _____ E-mail Address*: _____

DETAILS OF THE PERSONAL DATA REQUESTED

MODE OF ACCESS

I would like to: (check all that apply)

Inspect the record: Listen to the record:

Avail the record to me in the following format:

Photocopy: (Please note that copying costs will apply) Number of copies required: _____

Electronic: Transcript: (Please note that transcription charges may apply)

Other (Specify): _____

DELIVERY METHOD

Collection in Person

By Email (provide address where different to details provided above*): _____

By Mail (provide address*). Town/City: _____

DECLARATION NOTE: (Any attempt to access personal data through misrepresentation may result in prosecution)

I certify that the information given in this application is true.

Signature: _____ Date: _____

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