Data Subject Request Form

Request for Data Subject Rights under the General Data Protection Regulation and the Data Protection Act 2018

Details of Data Subject

Full Name*required	
Address Optional	
Contact Phone Number Optional	
Email Address*required	

Details of Request

Please indicate which right(s) you wish to request by marking X in the appropriate box or boxes below:

Right to erasure	
Right to restrict processing	
Right to data portability	
Right to object	
Right not to be subject to automated processing or profiling	
Right to withdraw consent	

The details of my request are:

Declaration

I declare that all the details I have provided in this form are true and complete to the best of my knowledge.

Signature of Requester: _____ Date: ____ / ____ / _

Please note that we will follow up to verify your identity

Please return completed form:

- By email to info@triviumvet.com

- By post to TriviumVet DAC, Unit 1N, Block 1A, Cleaboy Business Park, Old Kilmeaden Road, Waterford, Ireland, X91 DEC4.