

## California Consumer Privacy Act of 2018 (CCPA) Submission Form Instructions

Please read these instructions carefully. For your convenience, California Coast Credit Union (CCCU) created this form as a way for you to exercise your right to request:

- A list of personal information CCCU has collected from you within the past 12 months
- The deletion of that information
- To "opt out" if information is sold to third parties

CCCU will need to verify your identify to process your request. Additional information may be required to verify your identity if you request certain personal information. After CCCU has verified your identity, your request will be processed within 45 days.

For further information about CCPA, please visit <a href="https://www.calcoastcu.org/california-consumer-privacy.htm">https://www.calcoastcu.org/california-consumer-privacy.htm</a> or call (877) 495-1600.

## **Form Instructions**

- You must complete each section of the CCPA Submission Form, as applicable.
- The Form may be completed in person at any CCCU branch location.



## Submission Form for Request to Know and Delete Personal and/or Household Information

Name of Consumer:		
Date of Request:		
If you are not the Consumer making the request but rather please state your full name:		_
Are you a member with California Coast Credit Union? $\Box$ \	Yes □ No	
If you marked "yes" above, please provide your membersh	ip number:	
Please select all of the following that apply to your request	::	
Type of Request:		
1) Request to Know (please check all that apply to yo	our request):	
☐ Categories of Personal Info	ormation	
☐ Categories of Sources of Co	ollection	
☐ Business or Commercial Pu Information	urpose for Coll	ecting or Selling
☐ Categories of Third Parties	with Whom Ir	nformation is Shared
☐ Specific Pieces of Informat	ion	
Does your request include household information?	□ Yes	□No
2) Request to Delete Personal Information?	□ Yes	□No
Does your request include household information?	□ Yes	□No

## **Household Information Requests:**

If you check "yes" next to your request to know personal information, you are asking to provide information collected about everyone who reside with you. If you checked "yes" next to your request to delete personal information, you are asking us to delete not only your personal information but also the personal information of all of the members of your household.

To process this request, we need you to provide the names, date of birth, and the postal address of your residence. Please complete the information in the following table:



Household Address:		
Household Members (including yourself)	Full Name	Date of Birth
(including yoursell)		

We will need to verify your identity and (if applicable) the identity of all the members in your household to respond to your request. Within 10 days of your submission of this form, we will notify you of what we will need to verify your identity and the members of your household (if applicable).

If you do not have a password-protected account with us, and if we are able to verify everyone in your household, we will only respond to a request to know or request to delete as it pertains to household personal information by providing aggregate household information.

If all of the consumers of your household jointly request access to specific pieces of information for the household or the deletion of household information, and if we are able to individually verify all the members of the household subject to our verification requirements, then we will comply with this request.

If you are an authorized agent for the above referenced consumer, we will request a copy of your government issued identification card, and the source of your authority to act on behalf of the consumer (e.g., POA, letters of conservatorship, written instructions, etc.). Additional details will be provided to you regarding what we need to verify you and your request within 10-days of your submission of this form.