

Data Deletion Request Form

**Purpose:**

This form is used to request the deletion of your personal data held by **Dalet Access Labs**, in accordance with data protection regulations such as the CCPA, GDPR, or applicable state/federal laws.

1. Requestor Information

- **Full Name:** _____
- **Email Address:** _____
- **Phone Number:** _____
- **Address:** _____
- **City:** _____ **State:** _____ **Zip Code:** _____

2. Relationship with Dalet Access Labs

Check all that apply:

- ☐ Customer
- ☐ Employee
- ☐ Vendor/Partner
- ☐ Website User
- ☐ Other: _____

3. Data Subject (if different from above)

- **Full Name:** _____
- **Email:** _____
- **Relationship to Requestor:** _____

4. Data to be Deleted

Please describe the personal data you wish to have deleted. Include any relevant details (e.g., service used, date of interaction, account ID):

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5. Identity Verification

- ☐ I have attached a copy of a valid photo ID (e.g., Driver's License or Passport).
 - ☐ I authorize Dalet Access Labs to process this request as the data subject or their legal representative.
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6. Declaration

I certify that the information provided is true and accurate. I understand that the deletion of my personal data may be irreversible.

Signature: _____

Date: _____
