

EXERCISE THE RIGHT TO OBJECT (REQUEST FORM –A)

CONTROLLER DATA

Name/Company: _____, Address of the Office or Service
where the right of Erasure is exercised: Street: _____, Number: _____,
Postal Code: _____, City: _____, Province: _____, Country: _____.

INTERESTED PARTY DATA/LEGAL REPRESENTATIVE DATA

Name: _____
Address: _____
Identification Number: _____, E-mail: _____.

By means of this document, I exercise my right to object to the processing of my personal data, in accordance with the provisions of Article 21 of the Regulation (EU) 2016/679, of the European Parliament and of the Council, of 27 April 2016, on the protection of natural persons with regard to the processing of personal data and on the free movement of such data.

REQUEST

The objection to the processing of my personal data, taking into consideration that:

- The processing of my personal data is based on a mission of public interest or on the exercise of public powers conferred on the Controller, and their processing must be limited until a response is obtained from the exercise of this right.
- The processing of my personal data is based on the satisfaction of legitimate interests pursued by the Controller or a third party, and their processing must be limited until a response is obtained, regarding the exercise of this right.
- The processing of my personal data is being carried out for the purpose of scientific or historical research or statistical purposes.

Without prejudice to the fact it corresponds to the Controller to accredit compelling legitimate reasons that prevail over my interest, rights and freedoms (in the first two cases), or a mission carried out in the public interest (in the third case), I accredit as a personal situation to object to the processing of my personal data:

That my request be addressed in the terms set forth above within a period of one month.

In: _____, Date: _____

Signed by: _____

EXERCISE THE RIGHT TO OBJECT (REQUEST FORM –B)

CONTROLLER DATA

Name/Company: _____, Address of the Office or Service
where the right of Erasure is exercised: Street: _____, Number: _____,
Postal Code: _____, City: _____, Province: _____, Country: _____.

INTERESTED PARTY DATA/LEGAL REPRESENTATIVE DATA

Name: _____
Address: _____
Identification Number: _____, E-mail: _____.

By means of this document, I exercise my right to restriction of processing, in accordance with the provisions of Article 21 of the Regulation (EU) 2016/679, of the European Parliament and of the Council, of 27 April 2016, on the protection of natural persons with regard to the processing of personal data and on the free movement of such data.

REQUEST

The objection to the processing of my personal data for marketing purposes, including the elaboration of profiles on my person.

That my request be addressed in the terms set forth above within a period of one month.

In: _____, Date: _____

Signed by: _____

INSTRUCTIONS

1.- Request form A will be used when the affected party wishes to oppose the processing of their personal data, for reasons related to their particular situation, in any of the following situations:

- × The processing of his or her personal data is being carried out based on a mission of public interest or in the exercise of public powers, conferred on the Controller.
- × The treatment of my personal data is being carried out based on the satisfaction of legitimate interests pursued by the Controller or a third party.

In these first two cases, the mere exercise of the right to object entails the limitation of the treatment.

- × The processing of his or her personal data is being carried out for the purpose of scientific or historical research or statistical purposes

Request form B will be used when the affected party wished to oppose the processing of their personal data for direct marketing purposes, including profiling.

2.- It will be necessary to provide a photocopy of the Identification Card or the equivalent document that proves your identity and is considered valid in law, in those cases in which the Controller has doubts about his/her identity. In the event of acting through legal representation, an Identification Card and a document accrediting the representative's representation must also be provided.

3.- The Spanish Agency for Data Protection does not have your personal data and can only provide the contact details of the Data Protection Delegates of the entities obliged to designate one that have communicated their appointment to the Agency. You can also provide these contact details regarding those entities that have voluntarily designated a Delegate and have communicated it.

4.- The owner of the personal data subject to treatment must go directly to the public or private body, company or professional that they presume or are certain that possess his or her data.

5.- In order for the Spanish Data Protection Agency to process your claim in the event that your request to exercise the right to object has not been met, it is necessary that one month has elapsed since the submission of the request for which the right to object is exercised, and that one of the following documents be provided, together with the document that, if applicable, has been received from the data controller:

- × The refusal of the Controller to object the treatment of the requested data
- × A copy, stamped by the Controller, of the object request form
- × A copy of restriction of object requested form, stamped by the post office or copy of the receipt of the shipment by certified mail
- × Any other means of proof provided by the Controller and from which receipt of the request can be deduced