

EXERCISE THE RIGHT TO RESTRICTION OF PROCESSING

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 18 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

Let the treatment of my personal data be restricted, taking into consideration:

- That the treatment is illegal and I oppose to its suppression
- That the Controller no longer needs my personal data for the purposes for which they were collected, but I need them for the formulation, exercise or defence of my claims

That my request be addressed in the terms set forth above within a month, and that this restriction must be communicated to each of the Recipients that the Controller has communicated my personal data.

In: _____, Date: _____

Signed by: _____

INSTRUCTIONS

1.- This requested form will be used by the interested party who wishes to request the Controller to restrict the treatment of their personal data when any of the following situations apply:

- The treatment of your personal data is unlawful and the interested party opposes the deletion of their personal data;
- The Controller no longer needs the personal data for the purposes of the treatment, but the interested party needs them for the formulation, exercise or defence of their claims.

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 restriction has not been met, it is necessary that one month has elapsed since the submission of the request for which the right to restriction 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 restrict the treatment of the requested data
- × A copy, stamped by the Controller, of the restriction of processing request form
- × A copy of restriction of processing 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