

1. Person making the request

Initials and surname _____

Date of birth _____

Address _____

Postcode and town/city _____

Telephone number _____

Email address _____

2. The request

The request to improve, update, remove or protect the personal data relating to the person making the request concerns:

If necessary, use the reverse of this form

The reason for the request is:

If necessary, use the reverse of this form

3. Signature

Town/city	Date
_____	_____
	Signature of the person making the request

Proof of identity

In order to ascertain your identity, a copy of your proof of identity has to be included with this form.
The following are accepted as valid proof of identity: valid passport, valid identity card or a valid driving licence.

Send to

You can send this completed form, along with the copy of the proof of identity, to:

Meijers
for the attention of Legal & Compliance
P.O. Box 707
1180 AS Amstelveen

