

## PRIVATE BANKING

### Exercise of rights request form

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In the course of its business, Banque Internationale à Luxembourg (Suisse) SA (“BILS”) collects and processes your personal data transparently, securely and confidentially.

In accordance with Regulation (EU) 2016/679 (the “General Data Protection Regulation”) including the Swiss data protection law, we protect your data and ensure that you retain full control over their use.

As a natural person whose personal data are processed by BILS, you are entitled to:

- request access to your data
- request the rectification of your data
- request the erasure of your data
- request the restriction of the processing of your data
- request to exercise your right to object the processing of your data
- request to exercise your right to data portability

These rights are enshrined in the regulation, which in certain cases makes their exercise conditional. We will assess the extent to which they apply to your situation, and will always give you the reasons for our decision.

In accordance with the General Data Protection Regulation, please note that, if requests are clearly excessive, particularly by virtue of their repetitive nature, BILS may charge you an enquiry fee to cover the administrative cost of providing the information, entering into correspondence or taking the requested measures.

#### How to submit your request?

To submit your request, please complete this form and return it in one of the following ways:

- by email to [bils-dataprotection@bil.com](mailto:bils-dataprotection@bil.com), including “Data Protection – Request to exercise rights” in the subject line
- by postal mail to:  
Banque Internationale à Luxembourg (Suisse) SA  
Att: BILS Data Protection Officer  
7, boulevard Georges-Favon  
1211 Geneva  
Switzerland

Please attach a certified copy by a public notary of your ID (national ID card or passport) to your request so that we can formally identify you.

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Request date:

#### Your contact details

Name\*:

Surname\*:

Birth Name:

Date of birth\*:

Address\*:

Postcode\*:

Town/city\*:

Country\*:

Telephone:

Mobile:

Email\*\*:

#### You are

An account holder– Please provide your account number:

Any other natural person – Please state your relationship with BILS (beneficial owner, supplier, candidate, former employee, etc.):

#### Your ID document

**Please tick the type of ID provided:**

ID card (certified copy by a public notary – not applicable to a current account holder)

Passport (certified copy by a public notary – not applicable to a current account holder)

#### Your request to exercise rights

**Please specify your request to exercise rights, in terms of the right to access, rectify or erase data, the right to restrict their processing, the right to object, or the right to data portability:**

\* *Champs obligatoires*

\*\* *Votre adresse email nous est indispensable en cas de demande d'exercice du droit à la portabilité. Sans cette information, il ne nous sera pas possible de mettre vos données à disposition via notre solution sécurisée.*