



ACCESS REQUEST FORM

The Data Privacy Act of 2012 provides you ("the Data Subject" or "the Authorized Requestor", if not the Data Subject) with the **right to access and receive a copy of the personal data** we, Bloomberry Resorts and Hotels Inc. (BRHI)/Sureste Properties, Inc. (SPI) (collectively, the "Company"), hold about the Data Subject. This form is used to confirm your identity and to assist us in locating your personal data.

This form can also be used to confirm the identity and authority of someone making the request on behalf of the Data Subject.

Your request will be processed within **thirty (30) days** upon receipt of this form. We may require reasonably sufficient personal data from you to satisfy the Company as to your identity and to locate the personal data requested before we can comply with your access request.

I. Data Subject Details

Full Name:

Email Address:

Address:

Relationship to				
the Company:				
II. Authorized Reque	estor Details			
			<u> </u>	1
Are you the Data	Subject?	☐ Yes	□No	
If you are not the	e Data Subject, you	ı must sup	ply the	following documentary evidence to
confirm the Data S	Subject's authority s	supporting	this req	uest:
☐ Duly no	tarized Special Pow	er of Attor	ney from	n the Data Subject; or
☐ Appoint	ment as receiver or	administr	ator issu	ed by a competent court.

Contact number

(Telephone/Mobile):





If **authorized**, please provide the following information:

Full Name:						
Address:						
Email Address:		Contact number (Telephone/Mobile):				
Relationship to the Data Subject:						
_	ubject's Identity and Autho	·	•			
A. You must confirm the identity of the Data Subject by submitting us an original or certified true copy of one of the documents listed below. Please tick the appropriate box to indicate which document you have enclosed.						
☐ Governn License ☐ Passport	•	earance, Senior Citizen'	's ID, PRC ID, Driver's			
supply a co	Subject's name is different for some of documentary evidence age certificate, change of nar	to confirm the Data Sub	oject's change of name			
Requestor k	not the Data Subject, you roy submitting us an original c oy. Please tick the appropriat	or certified true copy of	one of the documents			
	ment-issued ID (TIN, NBI Cla and so on)	earance, Senior Citizen	's ID, PRC ID, Driver's			
you must	orized Requestor's name is or supply a copy of docume s change of name (e.g., ma eclaration).	entary evidence to co	nfirm the Authorized			

III.





IV. Confirming Authorized Requestor's or Data Subject's Mailing Address

If you opt to have your personal data mailed to the Authorized Requestor's or Data Subject's address, you must confirm your address by sending us a certified true copy of one (1) of the documents listed below. Please tick the appropriate box to indicate which document you have enclosed. ☐ Gas, electricity, water or telephone bill in the Authorized Requestor's/Data Subject's name for the last quarter ☐ Council tax demand in the Authorized Requestor's/Data Subject's name for the current financial year ☐ Bank or credit card statement in the Authorized Requestor's/Data Subject's name for the last quarter V. Requested Personal Data Our search for information relating to the Data Subject will be based on the information provided below. The Company processes personal data for the following purposes. Please tick the box(es) next to the purpose(s) that you would like us to search. ☐ Accounts and records (for example purchases, sales or other transactions) ☐ Advertising, marketing and promoting public relations ☐ Complaints handling ☐ Information and database administration ☐ Licensing and registration ☐ Research ☐ Staff administration ☐ HR and employment records

☐ Admission and enrollment

☐ Alumni





Description of personal information:

Please specify clearly and in detail the personal data requested (e.g., personal data contained in medical records, credit reports, employment evaluation, and vendo accreditation records). General description of the requested data, such as "all of migresonal data", may render the request being refused by the Company as it may unreasonably locate the personal data to which the request relates to.
Any other information which will assist in searching for the personal data of the Data Subject? (e.g., case or reference number and the name of the person in the Company you have had dealings with in the past, date of collection, and so on)
Preferred Manner of Compliance
I would like to receive it in the form of
(e.g., USB, CD, printed copy, etc.)
☐ I would like the reply to be delivered to the mailing address noted in the item IV above.
☐ I would like the reply to be delivered through soft copy/scanned copy to my e-mail address.
☐ I would like to receive it personally by hand.

VI.





VII. Formal Declaration and Consent.

In the exercise of the right granted to me under the terms of the Data Privacy Act of 2012, I request that you provide me with a copy of the personal data about the Data Subject which you process for the purposes I have indicated overleaf.

I confirm this is all of the personal data to which I am requesting access. I also confirm that I am either the Data Subject, or am authorized to act on their behalf. I am aware that it is an offence to unlawfully obtain such personal data, e.g., by impersonating the Data Subject or its authorized representative.

I certify that the information given in this form is true and accurate. I understand that it is necessary for the Company to confirm my/the Data Subject's identity and it may be necessary to obtain more detailed information in order to confirm my identity and/or locate the correct information.

By signing this form, I likewise explicitly and unambiguously consent to the collection, processing and storage of the personal data provided in this Form for the purpose(s) of providing the access request which I hereby make and that which is stated in the Company's Privacy Policy (accessible at https://www.solaireresort.com/about#privacy-policy).

Signed by:	
Signature over Printed Name	Date (YYYY-MM-DD)





Checklist:

Have you:

1) Completed the Access Request Form in full?	
2) Enclosed the relevant form of identity and authority (see section 2)	
3) Enclosed the relevant form of identity and address (see section 3 and 4)	
4) Included document/s as proof of correct information?	
5) Signed and dated the Access Request Form?	

Send the completed form and enclosures to:

Data Protection Officer
Compliance Department
Solaire Resort and Casino
1 Asean Avenue Entertainment City
Tambo, Parañaque City
1701 Manila, Philippines