



Mortgage Bankers  
RC: 31732

# LAGOS BUILDING INVESTMENT COMPANY

Plot 1, ASSBIFI Road Central Business District, Alausa, Ikeja, Lagos State

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## **LBIC Data Subject Access Request Form**

Please complete sections 1- 4 and 8 if you are applying to access your own personal information. If you are giving permission to someone else to apply for access to your personal information on your behalf, all sections must be completed.

### **1. Personal Details (Of Data Subject)**

Surname: \_\_\_\_\_

Maiden name (if applicable): \_\_\_\_\_

First name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Before processing a request, we need to have proof of the identity of the data subject. This is to protect the identity of the data subject and ensure compliance with the Data Protection laws.

### **2. Proof of Identity (Of Data Subject)**

To help us establish your identity you must enclose proof of your identity (this should be current and can be a copy).

NIN

Driver's License

International Passport

Other

### **3. Details of Information Required (Please Be As Specific As Possible)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **4. Authorization Of Data Subject**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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If the information is requested on behalf of the data subject by a third party, we also need to establish proof of their identity.

## 5. Personal Details (Of Third Party Acting On Behalf Of The Data Subject)

Surname: \_\_\_\_\_

Maiden name (if applicable): \_\_\_\_\_

First name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

## 6. Proof of Identity (Of Third Party Acting On Behalf Of The Data Subject)

If you are acting on behalf of the data subject, you must enclose a copy of your identification and official documentation showing that you are authorized to apply on behalf of the data subject's. This is to protect the identity of the data subject and ensure compliance with the Nigerian Data Protection Act 2023.

## 7. Authorization of Data Subject for Third Party Request (if applicable / possible)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## 8. Checklist

A. Proof of identity of data subject

B. Proof of authorization (if applicable)

In line with LBIC's DSAR Policy you will receive a response to your request within 30 calendar days of receipt of this form and the necessary identification.

Please return the completed form to: [dpo@lbicplc.com](mailto:dpo@lbicplc.com).

Please note that it is an offence to impersonate an individual to obtain personal data.