



AXA Data Protection Consultant
AXA Insurance Ltd. / AXA Life Ltd.
IT Risk, Security & Compliance
Pionierstrasse 3
CH-8400 Winterthur

Sender:

Last name: _____
First name: _____
Street, no.: _____
Postcode, place: _____
Place, date: _____ , _____

Request for blockage

Dear Sir or Madam

Based on Art. 12 para. 2b and Art. 15 para. 1 of the Federal Data Protection Act of June 19, 1992 (DPA), I hereby request that you block all of the following data in your data collection from sharing with third parties:

(enter data to be blocked) _____

I would ask you to confirm this in writing within 30 days or to inform me in a justified decision why you are unable to comply with my request.

Yours sincerely

Signature _____

Enclosure: Copy of my ID