

Tel: 212-244-3000 Fax: 212-244-3054

California Consumer Privacy Act Rights Request Form

Please use this form if you wish to submit a request related to personal information managed by Woori America Bank in accordance with your privacy rights under the California Consumer Privacy Act (CCPA).

Request for Action (Please select from the options below):	
Right to Know (requesting the personal	al information which we store about you)
Right to Delete (requesting that we del from you)	lete personal information that we collected
Right to Correct (requesting correction collected from you)	n to your personal information that we
including for verifying your identity. Woori Ar	only be used as part of evaluating and responding to your request, merica Bank will maintain a record of this request pursuant to Civil d <i>must</i> match that within the Bank's systems for validation purposes.
Current Banking Relationship:	
Account holder Acct. Type: _	Acct. Number
Former holder Acct. Type: _	Acct. Number_
Prospective Customer	
Last Name:	First Name:
Email Address:	Phone Number:
For Authorized Agents*:	
Last Name:	First Name:
Email Address:* * Woori America Bank requires proper documents su	Phone Number: upporting/evidencing authorization to make request on behalf of Consumer.
Description of Information Needing C	Correction:

Information requests are subject to an identification and verification process. By submitting this request, you state under penalty of perjury that you are the person whose personal information is the subject of the request.