

Individual Privacy Information Request Form

Individuals who submit personal data to the Utah Department of Commerce have the right to:

- -Request access to their personal data.
- -Amend or correct their personal data.

□ Division of Securities

□ I don't know

Office of Professional Licensure Review

☐ Office of Homeowners' Association Ombudsman

☐ Office of Artificial Intelligence Policy

-Change/Update their personal data to reflect changes in their circumstances. -Receive an explanation concerning how their personal data is being used. -I am an "at-risk" employee and requesting to make my personal information a private record. Disclaimer: This form is specifically designed for personal data access and information requests, including access to personal data, correction of inaccuracies, and requests for explanations of data processing. This form will not update a professional license, business entity registration, or any registration/license filed with the Department of Commerce. Please contact the appropriate division directly for assistance with changes or updates to a registration or license. ☐ I acknowledge that I have read the Disclaimer listed above and I am requesting access to my personal data or the personal data of an individual for whom I am the legal guardian. To submit a request via mail, please answer the following questions, provide the required information, and mail to: **Utah Department of Commerce** Heber M. Wells Building Attn: Privacy Officer 160 East 300 South P.O. Box 146701 Salt Lake City, Utah 84114-6701 Which Division of the Utah Department of Commerce are you requesting or inquiring about? ☐ Commerce Administration □ Division of Consumer Protection □ Division of Corporations and Commercial Code ☐ Office of Consumer Services Division of Professional Licensing ☐ Division of Public Utilities □ Division of Real Estate ☐ Office of the Property Rights Ombudsman



Individual Privacy Information Request Form Continued:

Full Name:
First and Last Name of Legal Guardian (if applicable):
Mailing Address:
Email:
Phone Number:
Please select the option that best describes your relationship to the data subject:
$\ \square$ I am requesting access/information concerning my personal data.
$\hfill \square$ I am requesting access/information concerning the personal data of an individual for whom I am the legal guardian.
If you are the legal guardian making this request, please provide your full name:
Please select all that apply to your request:
Request access to the personal data the department holds about you.
Amend/Correct any inaccuracies in your personal data.
☐ Change/Update your personal data to reflect changes in your circumstances.
Receive an explanation of how the department uses your personal data.
☐ "At-Risk" government employee requesting to make my personal information a private record under Utah Code 63G-2-302.
Privacy Notice: The information provided in this form will be used by the Department of Commerce to evaluate and complete your request. Failure to provide complete information as requested will result in the denial of your request as incomplete. To comply with legal and regulatory requirements, we may share information provided in this form with authorized parties such as other government agencies, national licensing databases, contracted vendors, etc. Additionally, many items collected by the Department of Commerce are classified as "public" under the Government Records Access and Management Act, Utah Code § 63G-2-101 et seq. For more information on how the information you provide is shared, please refer to https://www.utah.gov/support/privacypolicy.html
$\ \square$ By checking this box, you acknowledge receipt of this information.
Date:
Signature: