

## ACCESS REQUEST FORM

For enquiries, please call: 6571 0128

### IMPORTANT INFORMATION


1. Please read the instructions carefully before completing this Access Request Form.
2. Verification will be conducted in person at form submission and again at data collection. Please bring along a government issued photo ID.  
We do not record ID numbers; ID is sighted only to confirm identity.
3. We will endeavour to process your access request within 30 days upon receipt.  
If we are unable to meet this timeline, we will notify you of the revised timeline.
4. Please note that under the Singapore Personal Data Protection Act 2012, access request may not be permitted under certain circumstances or in respect of certain type of personal data. Data or documents that constitute or contain customer, confidential or proprietary information of other individuals will also not be disclosed to you.
5. The personal data collected in this form will be used and disclosed for the purpose of processing this access request and other purposes directly related to it. By completing and submitting this request form, you consent to such purposes.

### SECTION 1 – PARTICULARS OF REQUESTOR

FULL NAME AS IN NRIC (Please underline <u>SURNAME</u> )		IC / PASSPORT NO. (Last 3 digits + alphabet) _____
CONTACT NUMBER(S)	E-MAIL ADDRESS	
MOBILE PHONE:	MAILING ADDRESS (Should <u>not</u> be a P.O. Box address)	
HOME PHONE:		
OFFICE PHONE:		
<p>I understand the information provided above by me will be updated in DCS system as my latest personal particulars and will be used to contact me.</p> <p>I am requesting access to personal data relating to: (Please TICK) :</p> <p><input type="checkbox"/> Uses and disclosures of my Personal Data during the past 12 months (or since the date of my Membership; whichever is later)</p> <p><input type="checkbox"/> Please provide the following information you have on me:</p> <p>_____</p> <p><b>We will notify you of collection details when your request has been processed.</b>  <b>This will be self-collection at: DCS Card Centre Pte. Ltd. 7500E Beach Road #03-201 The Plaza, Singapore 199595.</b></p>		

### SECTION 2 – DECLARATION

By submitting this form and signing below, I hereby confirm that all the information given in this form and in any document submitted by me is true and accurate. I agree that DCS may contact me to verify my identity or request for additional details to locate and retrieve the requested personal data. I am aware that it is a criminal offence under the Singapore Personal Data Protection Act 2012 for a person to make a request to obtain access to another individual's personal data without the authority of that individual.




**Cardmember**  
**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_  
(as per DCS's records, if applicable)

### For Official Use Only

Verified by CSO:	Form Received By (PDPA):
	Date Received by PDPA:

### ACKNOWLEDGEMENT FOR SELF-COLLECTION

(Note: Customer verification by sighting photo ID is necessary)

CUSTOMER NAME	Date & Time of Collection :
CUSTOMER SIGNATURE	Staff Name & Signature
	

Please send your completed Form either by (i) Using the Reply Folder OR  
(ii) Email to: [pdpa@dcsc.com](mailto:pdpa@dcsc.com)

**THANK YOU** for your request.

**Please send us your form with this prepaid Business Reply Folder.**

1. Fold along the dotted lines;
2. Put in your Form into this folder;
3. Glue or tape the edges of this folder;
4. Mail this folder at your nearest post box.

NO STAMPS REQUIRED



**PRIVATE & CONFIDENTIAL**

BUSINESS REPLY SERVICE  
PERMIT NO. 00429



**DCS CARD CENTRE PTE. LTD.** 197300502W  
PRIVY NUMBER 920013  
SINGAPORE 929292

Postage will be  
paid by  
addressee.  
For posting in  
Singapore and  
Malaysia only.