

**DATA ERASURE REQUEST FORM**  
*pursuant to Article 17 of EU Regulation 2016/679*

<b>Data Controller</b> Basis Plant Services Srl
<b>Data Subject</b> The undersigned _____, tax code no. _____, identity document no. _____, with this form and pursuant to art. 17 of EU Regulation 2016/679 (GDPR), requires the Data Controller the erasure of the own personal data that are subject to processing.
<b>Type of request</b> The Data Subject, in accordance with current legislation on the protection of personal data, requests the following type of erasure: <ul style="list-style-type: none"><li><input type="radio"/> <b>total</b>, of all personal data concerning Data Subject, except for the personal data that the Data Controller is required to keep in order to comply with a legal obligation;</li><li><input type="radio"/> <b>partial</b>, only some of the personal data processed by the Data Controller. In particular, of the following personal data (<i>please specify</i>): _____</li></ul>
<b>Reason for the request</b> Please select at least one of the following reasons: <ul style="list-style-type: none"><li><input type="radio"/> the personal data are no longer necessary for the purposes for which they were collected or otherwise processed;</li><li><input type="radio"/> the Data Subject withdraws the consent on which the processing is based;</li><li><input type="radio"/> the Data Subject objects to the processing performed for public interest or related to the exercise of public authority by the Data Controller, and there are no overriding legitimate grounds for the processing;</li><li><input type="radio"/> the personal data have been processed unlawfully;</li><li><input type="radio"/> the personal data have to be erased for compliance with a legal obligation to which the Data Controller is subject;</li><li><input type="radio"/> other (<i>please specify</i>): _____</li></ul>
<b>Contact data</b> The undersigned requests to receive feedback on this request at the following address ( <i>address or e-mail address</i> ): _____
Place and date: _____, ____/____/____ Signature: _____

*In order to allow the Data Controller to verify the identity of the Data Subject, please attach to this request a copy of a valid identification document.*

*Send the request to [basisplant.privacy@basisgroup.com](mailto:basisplant.privacy@basisgroup.com).*