Consumer Privacy Rights Request Form

Neoperl, Inc. (“Neoperl”) honors privacy rights afforded to individuals under applicable privacy laws. This Privacy Rights Request form enables you to submit a request to know and access your personal information collected by Neoperl, correct inaccurate information about you, or delete personal information we collect about you.

If you are interested in submitting a request to Neoperl under applicable privacy laws, you may fill out the form below for each request and email your request to us at us.info@neoperl.com or call us at +1 203-756-8451. If you are submitting a request on behalf of another individual, please select “Someone Else” as indicated below, complete the authorized agent form, and follow the form’s instructions.

Note, please select the “Do Not Sell or Share My Personal Information” hyperlink in the footer of our website, https://www.neoperl.com/us/en/, if you wish to opt out of the sale (if applicable) and/or sharing of your personal information for targeted advertising purposes. Please note, Neoperl does not sell your personal information to a third party for monetary or other valuable consideration.

To learn more about how Neoperl handles personal information, please see our Privacy Policy [https://www.neoperl.com/us/en/company/privacy-policy. We will use the information you provide below only to process your request and maintain a record of your request. If you have questions regarding this form or need assistance for accessibility, please contact us at +1 203-756-8451 or us.info@neoperl.com.

I am submitting this form on behalf of:

- ☐ **Myself**
- ☐ **Someone Else**

If you chose “Someone Else” please select which type of agent you are:

- ☐ **Authorized Agent**
- ☐ **Power of Attorney**

If you chose “Authorized Agent” please complete the following form:

Attestation of Authorized Agent WITHOUT Power of Attorney

If you chose “Power of Attorney” please complete the following form:

Attestation of Authorized Agent WITH Power of Attorney

If you are submitting this request on behalf of someone else, you acknowledge and agree that by submitting this request, you declare, under penalty of perjury, that you are an authorized agent who will provide proof of your ability to act on another's behalf who wishes to exercise their privacy rights. You understand and authorize Neoperl to contact you, or to the extent permitted by law, contact the individual whose personal information is the subject of the request.

Select request type:

- ☐ **Right to Access/Right to Know** (i.e., allows consumers to confirm whether Neoperl is processing their personal information through its Site (as defined below) and to access such data)
- ☐ **Right to Data Portability** (i.e., allows consumers to obtain a copy of their personal information collected through the Site by Neoperl in a portable and, to the extent technically feasible, readily usable format, allowing them to transmit the data to another controller without hindrance)
- ☐ **Right to Delete** (i.e., allows consumers to delete their personal information from Neoperl's Site records and direct any service providers or contractors to do the same, unless an exception applies)
- ☐ **Right to Correct** (i.e., allows consumers to correct inaccurate personal information that the Neoperl Site maintains about them)
- ☐ **Right to Appeal** (i.e., allows consumers to challenge Neoperl's decision not to take action on a previous request)
- ☐ **Other (Please complete the other details related to your request below)**

Please provide the following information required for us to verify your request:

Full Name: _____

Email Address: _____

Telephone Number: _____

Address: _____

City: _____ State: _____

Is this your State of Residency? Yes No

If no, please indicate your state of residency _____

Please indicate any other details related to this request:

If your request cannot be verified or is invalid for any reason, or if we require any additional information to process this request, we will contact you directly using the contact information you provided on this form.

This request is signed under penalties of perjury.

Signature/Digital Signature: Date:

_____ _____