

# Personal information Request for correction form



Please use blue or black pen and write in BLOCK LETTERS

**When to use this form?** To request a correction to your personal information. Under the privacy laws in New Zealand and if applicable, the European Union General Data Protection Regulation (GDPR), you have the right to request a correction to your personal information and if you provide a statement of correction, you have the right to request that it is attached to your information. For further information on your rights to correct personal information visit [bnz.co.nz/privacy/rights](https://bnz.co.nz/privacy/rights). If we decline your request, you have the right to make a complaint to the Privacy Commissioner who can be contacted at [privacy.org.nz](https://privacy.org.nz)

Please complete the following information (fields marked \* are mandatory):

## Your Name

First name*					
Middle name					
Last name*					
Date of birth*					
D	D	M	M	Y	Y

## Your current residential address\*

Address*	
Suburb*	
Town/City*	Postcode*
Country*	

## Contact details

Email address			
Mobile			
Telephone			
(tick preferred)	<input type="radio"/> Email	<input type="radio"/> Mobile	<input type="radio"/> Telephone

## Enter the account details relating to your request

(complete at least one):

### Access number

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### Account type

Personal  Trust  Joint  Other

### BNZ account number

0	2																		
Bank	Branch	Account number												Suffix					

### Policy number

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**Other** (enter the organisation and account/policy number)

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## What information is to be corrected?

**What does it relate to?\*** e.g. employment, matrimonial, insurance, other

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**Have you made an access request (relating to this request) in the last 12 months?**  Yes

Reference number	
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**Is a statement of correction attached?**  Yes

## Specific details of the information to be corrected\*

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## What period does this information cover?

Start date	End date										
D	D	M	M	Y	Y	D	D	M	M	Y	Y

**Is it urgent?**

Reason for urgency	

## Things to know

### Right to withdraw

You have the right to withdraw your request at any time by contacting us.

### Fees may apply

In some circumstances fees may apply. If so, we will discuss this with you before proceeding with the request.

### When to expect a confirmation

As soon as practicable and usually within 20 working days from the date we receive your request.

## Declaration and Authority

By signing this form:

- I declare that I am the individual named in the form;
- I authorise the BNZ and related companies to share information about me and consult with applicable parties for the purpose of processing this request for the correction of personal information, and
- I authorise the BNZ and related companies to contact me, including by email, phone, text or post, to update me about this request; and
- I confirm the above information is correct and that I have made this request of my own free will.

Name	
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Signature	
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Date signed					
D	D	M	M	Y	Y

### Please send this form to

Branch: Your nearest BNZ branch. Email: [privacy@bnz.co.nz](mailto:privacy@bnz.co.nz)  
Post: BNZ, Private Bag 39806, Wellington Mail Centre.  
Lower Hutt 5045, New Zealand