

# California Consumer Privacy Act (CCPA) Personal Information Request Form

If you are a California resident, you may have the right to:

- 1. Request access to certain personal information we have collected about you.
- 2. Request that we delete certain personal information we have collected about you.
- 3. Opt-out of the sale of your personal information.

To exercise any of these rights, please complete the relevant portion of the form below, including any required supplemental forms. For more information about our privacy policy, please review Fashion Terrace 6888 LP's California Consumer Privacy Act Notice.

Certain provisions of the CCPA do not apply to personal information we receive from you reflecting a communication or transaction between us and another business when you are acting as an employee, owner, director, officer, or contractor of such company, partnership, non-profit, or government agency, and you are seeking a product or service from us for the company, partnership, sole proprietorship, non-profit, or government agency (a *Business Consumer*).

# Right to Know/Access

You have the right to request access to the categories of information we have collected about you and the specific pieces of personal information that we have collected about you that is subject to the CCPA.

This right does not apply to Business Consumers, current or former employees, and job applicants.

### Right to Delete

You have the right to request deletion of certain personal information that we have collected from you. Please note that we will only delete information that is subject to the CCPA and will not be able to delete any personal information that is necessary or appropriate to provide our products or services or that are subject to certain exceptions as permitted by law.

This right does not apply to Business Consumers, current or former employees, and job applicants.

## Right to Opt-Out of Sale:

You have the right to opt-out of the sale of your personal information we collect on our website, such as to provide personalized pages for visitors and provide assistance during the website visit.

Last Updated: July 29, 2024

# Step 1: Please identify which privacy right(s) you would like to exercise

Note: Please be advised that we can only search for your information using the details you provide. If you decline to provide information, our search may be incomplete. Depending on the response to your request, you may be required to provide proof of identity, such as a government issued photo ID, before it can be fulfilled. We will respond to your request consistent with applicable laws. You are limited to two (2) requests within a twelve (12) month period.

Are you a California resident?						
	Yes [		No			
What type of request is this?						
	Request to know	/acces	s the categories of information we have collected about you.			
□ you.	Request to know/access specific pieces of personal information we have collected about					
	Request to delet	e certa	in pieces of personal information we have collected from you.			
STEP 2: PERSON SUBMITTING THE REQUEST						
Is this request for yourself or on behalf of someone else?						
	Myself (Consumo	er)				
	On behalf of sor	meone	else (Authorized Agent)			
	Relations	ship to	Consumer:			

### If you are making the request(s) as a Consumer, you must:

- Complete the Consumer Information section below;
- Complete the CCPA Consumer Declaration of Identity Form available here; and
- Return the completed forms by emailing them to <u>privacy@mhagroup.ca</u>.

### If you are making the request(s) as an Authorized Agent on behalf of a Consumer, you must:

- Be registered with the California Secretary of State, if you are a business;
- Complete the Consumer Information section below;
- Complete the Authorized Agent Information section below;
- Complete the CCPA Authorized Agent Declaration of Identity Form available here;
- Request the Consumer to complete and return the CCPA Consumer Declaration for Authorized Agent Form available here from their own email account; and
- Return the complete forms by emailing them to privacy@mhagroup.ca.

Note: You may be contacted for evidence of your identity and that of the Consumer.

# **Consumer Information**

First Name  Last Name  Date of Birth (MM/DD/YYY)  Email Address  Primary Phone Number (including area code)  Secondary Phone Number (including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details (IP Address, Device ID, etc.)	F1	
Date of Birth (MM/DD/YYY)  Email Address  Primary Phone Number (including area code)  Secondary Phone Number (including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	First Name	
Email Address  Primary Phone Number (including area code)  Secondary Phone Number (including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	Last Name	
Primary Phone Number (including area code)  Secondary Phone Number (including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip Other Identifying Details	Date of Birth (MM/DD/YYY)	
(including area code)  Secondary Phone Number (including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	Email Address	
Secondary Phone Number (including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	Primary Phone Number	
(including area code)  Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	(including area code)	
Address Line 1 (Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	Secondary Phone Number	
(Street address)  Address Line 2 (Apartment, suite, floor, etc.)  City State  Zip Other Identifying Details	(including area code)	
Address Line 2 (Apartment, suite, floor, etc.) City State Zip Other Identifying Details	Address Line 1	
(Apartment, suite, floor, etc.)  City  State  Zip  Other Identifying Details	(Street address)	
City State Zip Other Identifying Details	Address Line 2	
State Zip Other Identifying Details	(Apartment, suite, floor, etc.)	
Zip Other Identifying Details	City	
Other Identifying Details	State	
	Zip	
(IP Address, Device ID, etc.)	Other Identifying Details	
	(IP Address, Device ID, etc.)	

# **Authorized Agent Information**

First Name	
Last Name	
Legal Entity Name	
DBA Name, if any	
Date of Birth (MM/DD/YYY)	
Email Address	
Primary Phone Number	
(including area code)	
Secondary Phone Number	
(including area code)	
Address Line 1	
(Street address)	
Address Line 2	
(Apartment, suite, floor, etc.)	
City	
State	
Zip	
Other Identifying Details	

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(IP A	ddress, Device ID, etc.)
STEP	3: PLEASE DESCRIBE THE NATURE OF THE CONSUMER'S INTERACTION WITH
FASHI	ION TERRACE 6888 LP
	Existing Customer
	Previous Customer
	Consumer who visited our website
	Current Employee
	Former Employee
	Job Applicant
	Other
STEP	4: PLEASE SELECT HOW YOU WOULD LIKE TO RECEIVE OUR RESPONSE
	By email to the email address provided above
	By mail to the mailing address provided above
Note:	If you are a Consumer submitting this request, we will email or mail the information provided in

Note: If you are a Consumer submitting this request, we will email or mail the information provided in the Consumer Information section above. If you are an Authorized Agent submitting this request, we will email or mail the information provided in the Authorized Agent section above.