

Data Subject Access Request Form

Introduction

At Origin, we respect your privacy rights and are committed to transparency in how we collect, use, and share your personal information. This form allows you to request access to your personal data that we may hold as part of your rights under applicable privacy laws.

Your Information

Full Name: _____

Email Address: _____

Phone Number: _____

Relationship to Origin:

- Current customer
- Former customer
- Employee/Former employee
- Job applicant
- Other: _____

Verification Information

To protect your privacy and security, we need to verify your identity before processing your request. Please provide at least one of the following:

- Date of birth (MM/DD/YYYY): _____
- Last 4 digits of the phone number associated with your account: _____
- The email address associated with your Origin account (if different from above): _____
- Your Origin username (if applicable): _____

For additional verification, we may ask you to:

- Answer security questions related to your account activity
- Provide a copy of a government-issued ID (which will only be used for verification purposes and will be deleted after your request is processed)

Request Details

Type of Request:

- Access to my personal data
- Information about how my data is processed
- Copy of my personal data
- Information about third parties with whom my data has been shared

- Other (please specify): _____

Time Period: Please specify the time period for which you are requesting information:

- All data
- From: _____ To: _____

Additional Details: Please provide any additional information that may help us process your request:

Format Preference

How would you prefer to receive your information?

- Electronic format (email)
- PDF
- Other: _____

Declaration

I, _____ (print name), confirm that the information provided on this form is correct and that I am the data subject whose name appears on this form. I understand that Origin may need additional information to confirm my identity and that you may contact me for further verification if necessary. I acknowledge that my request will be processed within 30 days of receipt of a fully completed form and proper identification.

Signature: _____

Date: _____

What Happens Next

1. We will acknowledge receipt of your DSAR within 3 business days.
2. We will verify your identity to ensure we're providing data to the right person.
3. We will process your request and provide a response within 30 days.
4. If your request is complex, we may extend this period by up to an additional 60 days, but we will notify you if this is the case.

How to Submit This Form

Please submit this completed form to:

- Email: compliance@useorigin.com
- Mail: Origin Privacy Team, 68 Harrison Avenue, Ste 605, PMB 50966, Boston, MA 02111

Privacy Notice

The information you provide in this form will only be used for the purpose of identifying the personal data you are requesting and responding to your request. We may share this information with our legal and compliance teams and third-party service providers who help us process DSARs. We will retain the information provided in this form for 2 years from the date of our response to document compliance with data protection requirements.

For more information about how Origin processes your personal data, please see our [Privacy Policy](#).

If you have any questions about this form or your privacy rights, please contact our Privacy Team at compliance@useorigin.com.