Submit a privacy request



| Loan # (if applicable) | Email | | |
|---|--------------|-------------|---|
| | | | |
| First and last name | | Birthdate | e |
| Address line 1 | | Phone | |
| Address line 2 | | Last 4 of | f SSN (if applicable) |
| City | State | 9 | Zip |
| Fields with an asterisk (*) are required. | | | |
| How would you like for us to deliver a response to | o your req | uest?* | |
| Select one option that best defines your current r | elationshi | p with G | iuild Mortgage.* |
| ○ Submitted information to determine loan eligibility | ⊖ Starte | d an applic | cation but didn't submit it |
| ○ Submitted an application ○ Active loan servicing | g customer | 🔿 En | nployee/former employee |
| O B2B contact (Please list the employer: | |) (| Job applicant 🛛 🔿 Not sure |
| Select your request type by choosing at least one Request to know: | option.* | | |
| What specific pieces of your personal information have provide additional proof of identification before a resp | | | |
| What categories of your personal information have been information was collected and the third parties that we | | | udes the sources from which that |
| Request to delete: | | | |
| Request to delete your personal information. (Note: You personal information deleted before your request will I to delete pursuant to Civil Code section 1798.105(c)(2) | be processe | - | |
| Request to correct: | | | |
| Request to correct your personal information. | | | |
| Please identify the personal information to be corrected and enclose | any supporti | na documen | tation necessary to verify your request * |

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| Fields with an asterisk (*) are required. | |
|--|--|
| Select your request certification type.* | |
| Option 1 - I certify that I am making this request on my own behalf and that I am a resident of the State of California. | |
| Please enclose proof of identification, which may include one copy of your driver's license, passport or state identification card. You may redact the driver's license number at your discretion. | |
| Option 2 - I certify that I am a third-party agent authorized to make this request on behalf of the above-named individual. By making this request, I understand and acknowledge that proof of authorization AND identity verification is required to submit this form. Proof of authority can include power of attorney or written authorization. Please enclose written permission signed by the individual authorizing you to make this request on his/her behalf and proof of the individual's identification. Agent first and last name* Email Phone Agent company name Address line 1* Agent city* Agent state* Agent zip code* | |
| | |

I declare, under the penalty of perjury, that the information I have provided is accurate and complete to the best of my knowledge.*

California residents only - The California Consumer Privacy Act allows CALIFORNIA RESIDENTS ONLY to request to know more about how a business treats their personal information and, in certain cases, to request to delete that information. A business may not disclose or delete a consumer's personal information if that information was collected, processed, or disclosed pursuant to the federal Gramm-Leach-Bliley Act or the California Financial Information Privacy Act. Additionally, residents are limited to no more than two (2) requests within any 12-month period. Other exceptions may apply and therefore impact whether or not a business must disclose or delete personal information upon request.

Please note that Guild Mortgage Company does not and will not sell your personal information.

Mail to: Guild Mortgage Company, Attn: Legal Department, 5887 Copley Drive, San Diego, CA 92111