
Last Revised: December 19, 2019

Verifiable Consumer Request (“VCR”) Form

I. INTRODUCTION

Inter-Con Security Systems, Inc. (“Inter-Con”) recognizes that your privacy is important. Under the California Consumer Privacy Act of 2018 (“CCPA”), you may be eligible to exercise certain rights regarding personal information we may have about you. For further information on exercising your rights, please visit the State of California Department of Justice website (<https://oag.ca.gov/privacy/ccpa>).

II. INSTRUCTIONS

You must complete and securely submit this VCR form for Inter-Con to respond to your request. Providing as much information as possible will expedite your request and assist with verifying your identity. We will not accept requests regarding your personal information from minors or unauthorized agents. After you or your authorized agent have/has completed this VCR form, please send it by:

MAIL	E-MAIL
ATTN: Legal Department Inter-Con Security Systems, Inc. 210 South De Lacey Avenue Pasadena, California 91105	privacy@icsecurity.com Subject Line: VCR – Name (Last, First, M.I.)

III. RESPONSE

Once we have received your completed VCR form, we will notify you of receipt within ten (10) days. Inter-Con will promptly take steps to respond to your VCR within forty-five (45) days of receipt. Should Inter-Con require an additional forty-five (45) day extension, we will notify you as permitted by the CCPA. In the event Inter-Con cannot verify your identity and/or respond to your VCR, we will provide you with our reasons for not being able to do so.

IV. DISCLAIMERS

While Inter-Con strives to process your request free of charge, we may charge a reasonable fee or refuse the request if your request is deemed to be manifestly unfounded or excessive, repetitive, or unduly burdensome. The law does not require us to provide personal information to you more than twice in a 12-month period.

While any information you provide us in this VCR form will be held strictly confidential and used for the limited purpose of identity verification, we expressly disclaim any liability for unauthorized and/or inadvertent disclosures by you, your agent(s), or third-party delivery, shipping, and service providers (e.g., United States Postal Service, FedEx, Gmail, etc.).

V. CONTACT

We highly recommend that you visit our website (<https://www.icsecurity.com/privacy-policy/>) and review our policies. Should you have any questions or concerns, please contact us at privacy@icsecurity.com or toll-free at +1 (800) 439-5550.

1.	Date of Request		
2.	Name (Last, First, Middle Initial)		
3.	Date of Birth (Year-Month-Day)		
4.	Home Address		
5.	Are you a California resident?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6.	Phone Number		
7.	Email Address		
8.	Please check all the boxes that apply to you.	<input type="checkbox"/> Job Applicant	<input type="checkbox"/> Current Employee
		<input type="checkbox"/> Former Employee	<input type="checkbox"/> Client
		<input type="checkbox"/> Contractor	<input type="checkbox"/> Authorized Agent
		<input type="checkbox"/> Other (Please describe):	
9.	Type of Request	<input type="checkbox"/> Request Collection and Use Disclosures	
		<input type="checkbox"/> Access Personal Information	
		<input type="checkbox"/> Update Personal Information	
		<input type="checkbox"/> Delete Personal Information	
		<input type="checkbox"/> File a Data Privacy Complaint	
		<input type="checkbox"/> Other (Please describe):	
	Please describe your request in further detail:		
10.	Have you submitted a VCR form to Inter-Con before?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
		If yes, when?:	

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ AND UNDERSTOOD THIS DOCUMENT IN ITS ENTIRETY, AND BY SIGNING BELOW, I AM VOLUNTARILY AND LAWFULLY PROVIDING PERSONAL INFORMATION AND AUTHORIZE INTER-CON SECURITY SYSTEMS, INC. TO VERIFY MY IDENTITY, RESPOND TO MY REQUEST, AND CONTACT ME AS NECESSARY.

 Signature

 Date