



California Consumer Request Form

Instructions: California residents can use this form to submit requests under the California Consumer Privacy Act (CCPA) regarding personal information collected by Crown Laboratories, Inc. ("Crown"). Crown reserves the right to refuse requests, in part or in whole, to the extent permitted by law, if we are unable to verify your identity, or if we cannot verify your authority to act on behalf of another person.

For certain requests, we may ask additional information or documents to verify the identity of the consumer who is the subject of the request. The information provide through this form will be used to respond to your request, including verifying identity, identifying personal information

1. Requestor information

Full Name:

Email Address:

State of Residence:

2. Are you the consumer?

Yes, I am making a request related to personal information about me.

No, I am acting as an authorized agent for the consumer. I have enclosed a *California Authorized Agent Designation* form completed and signed by the consumer.

3. Consumer information (if different from requestor)

Full Name:

Email Address:

State of Residence:



4. Request for online activity information

If your request applies to online activity information that Crown may have collected through cookies or similar technologies, you must make your request from the browser or device that you have previously used to access Crown's website or apps. This allows us to read any identifier that we have assigned to your browser or device.

5. Specify the request(s) – check all that apply

Request to know categories of personal information Crown has collected, used disclosed, and/or sold about the consumer

Request to obtain specific pieces of personal information Crown collected about the consumer

Request to delete personal information Crown has collected from the consumer

DECLARATION

BY SUBMITTING THIS FORM, I HEREBY CERTIFY THAT THE INFORMATION ENTERED INTO THIS FORM IS COMPLETE, ACCURATE, AND UP-TO-DATE, AND THAT I AM THE CONSUMER WHO IS THE SUBJECT OF THE REQUEST OR HAVE BEEN AUTHORIZED BY THAT CONSUMER TO ACT ON HIS/HER BEHALF, AS INDICATED ABOVE. I UNDERSTAND THAT IT MAY BE NECESSARY FOR CROWN TO VERIFY THE IDENTITY OF THE CONSUMER AND/OR AUTHORIZED AGENT FOR THIS REQUEST, AND ADDITIONAL INFORMATION MAY BE REQUESTED FOR THIS PURPOSE.

**Please submit this form to Crown via mail to: Crown Laboratories, Inc.
ATTN: Customer Service, 207 Mockingbird Lane, Johnson City, TN 37604; or, via
email at CCPA@Crownlaboratories.com**