



California Consumer Privacy Act Request Form

California residents have the right under the California Consumer Privacy Act (CCPA) to request access to the personal information collected about them and the right to opt out of the sale of personal information. California residents may also have the right to request the deletion of some personal information, subject to certain exceptions.

Please complete the questions below and return to us via email at privacy@guard.com or via U.S. postal service using the address shown below. We reserve the right to refuse a request if we cannot verify your identity or your authority to act on another individual's behalf. If you have any questions, please feel free to contact one of our Customer Service Representatives at 800-673-2465.

Full Name:
Street Address:
City, State, Zip:
Contact email:
Insured/Business Name (if applicable):
Please select which type of consumer you are and provide the appropriate information so we can attempt to identify you and fulfill your request.
Policyholder:(Provide your policy number or customer ID.)
(Provide your policy number or customer ID.)
Claimant:(Provide your claim number.)
(Provide your claim number.)
Applicant/Employee (Current or Previous):
(Provide name.)
Other:(Provide identifying information.)
(Frovide identifying information.)
If you are an Authorized Agent making this request on behalf of another individual, in order to process your request, we will also need you to include with this form one of the following:
 Written permission from the consumer that includes the consumer's name, address and identifying information (policy number, claim number, other) that states the Authorized Agent may make requests on their behalf and confirm their identity with us.
Proof of Power of Attorney of the Authorized Agent pursuant to Probate Code sections 4000 and 4665.
What action(s) are you requesting? Please check all that apply.
Copy of personal information (<i>If selected, please additionally select one or more below</i>):
Categories of Personal Information Collected Specific Information Collected
☐ Deletion of personal information
☐ Do not sell personal information
Other (Explain):

Home Office: 39 Public Square • P.O. Box AH • Wilkes-Barre, Pennsylvania 18703-0020