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VERSION: CODE: 001 ABS-F-011

Date (dd/mm/yyyy):

Name or registered name: ID number / Tax ID number:

ID number / Tax ID n	umber:					City	/ Municipality
ONLY F	OREIGN S	UPPLIERS	: PAYMENT AUTHOR	IZATION OF LEGA	L ENTITY - E	BANK TRANSFER	R PAYMENTS ABROAD
Country of tax resider	ice:						
Bank:							
Bank address:							
Swift Code:						ABA / CLABE:	
Transit number: IBAN Code:							
Bank account number: Country:						City:	
Payment details:							
Notes:			unt la farma atlan				
	the data that corresponent the part of the		ant information. mpany with whom the contract was sig	ned			
2. The bank transfer			QUIRES THE USE OF AN 1		PLEASE COMPLE	TE THE INFORMAT	ION BELOW:
Intermediary bank:							
Bank address:							
Swift Code:						ABA / CLABE:	
Transit number: IBAN Code:						· <u> </u>	
						City:	
Country:							
Notes:			unt la fa una atla a				
 Please fill out only the data that corresponds to your bank account information. The Bank transfer will be made in the name of the person or company with whom the contract was signed. 							
2. The bank transfer	will be made in the nam	le of the person of co	inpany with whom the contract was sig	neo.			
TREATMENT OF PERSONAL DATA AUTHORIZATION							
Given that it is in my interest to develop a business or dvill relationship with the Chamber of Commerce of Bogota (CCB), identified with Tax ID number 860.007.322-9, with registered office in Bogotá - Colombia, on Avenida el Dorado No. 68 D - 35, telephone number +57 (601) 383-0330 and webpage www.ccb.org.co, as owner of the data, by completing and signing this document I expressly give authorization to collect, store, handle and use the data provided to: 1) Verify and/or complete the information submitted for registration and/or updating in the database of potential CCB suppliers. 2) Make payments to suppliers and carry out the activities derived from the normal relationship of contracting goods or services or with a third party with whom they enter into collaboration agreements. 3) Generate analysis, statistics and reports. The CCB, as data controller, may advance these purposes through physical, electronic, digital or telephone means.							
I declare that I have express authorization of the third parties that have been included in the present form and that If necessary I will provide proof of it. I declare that I know and can consult the Personal Data Protection Policy of the CCB at www.ccb.org.co/protecciondedtospersonales and solve any concerns related to the processing of my data and/or exercise my rights as the owner of the information by writing to the email protecciondedtos@ccb.org.co, or at any of the CCB offices, in complenee with the provisions of Article 2.2.2.5.4.1 of Decree 1074 of 2015.							
misleading data, or any o	ata whose processing i in current legislation;	s prohibited or has no	ot been authorized; (iii) requesting pro	of of the authorization that was g	anted; (iv) submit to th	e Superintendence of Industr	any partial, inaccurate, incomplete, fragmented or ry and Commerce (SIC) any complaints relating to d (vi) abstaining from answering any questions on
I know that in the cases in which I act as data processor of the CCB, I am obliged to implement security measures of a technical and organizational nature, which guarantee the security of personal data and prevent their alteration, loss, treatment or unauthorized access; comply with the current regulations established by the Colombian Government in relation to the protection of personal data, including but not limited to complying with the principles and guidelines established by the Colombian Government in relation to the protection of personal data, including but not limited to complying with the principles and guidelines established in Law 1581 of 2012 and its regulatory decrees; apply the guidelines issued by the CCB and guarantee compliance with the CCB's Personal Data Protection Policy; Refrain from communicating or using the data that I know in the development of my work in my favor or in favor of third parties or give them a purpose other than that established in the contract; notify the CCB immediately of any security incident involving information about any request, complaint or claim by a data owner.							
Legal representative signature:							
Name of legal representative			First Name	Middle Name		First surname	Second surname
Document type	🗌 ID	Passport	Document number				
	ID card issued by a	a foreign country	Describe			Issuing country	
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