



*First American*

**First American Financial Corporation  
California Consumer Privacy Act  
Authorized Agent Form**

*This authorized agent form may be used to designate a natural person or business entity registered with the California Secretary of State to act on the undersigned California resident's behalf subject to the requirements of the California Consumer Privacy Act ("CCPA") and its implementing regulations.*

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**Authorized Agent:** \_\_\_\_\_ **Individual**                      \_\_\_\_\_ **Registered Entity**

**Consumer:** \_\_\_\_\_

**Agent:** \_\_\_\_\_

I, \_\_\_\_\_, the undersigned, do hereby authorize \_\_\_\_\_ of \_\_\_\_\_ to act on my behalf and take all actions necessary relating to my rights under the CCPA, including submitting verifiable requests to, and communicating with First American Financial Corporation or one of its subsidiaries and/or affiliates.

\_\_\_\_\_  
[CONSUMER NAME]

\_\_\_\_\_  
[DATE]

\_\_\_\_\_  
[AUTHORIZED AGENT NAME]

\_\_\_\_\_  
[DATE]

Send the completed form to [dataprivacy@firstam.com](mailto:dataprivacy@firstam.com) or mail it to:

First American Financial  
Attn: Data Privacy Program  
1 First American Way  
Santa Ana CA 92707