

## CCPA Individual Rights Request Form

If you are a resident of California, you have additional rights pursuant to the California Consumer Privacy Act of 2018 (the “CCPA”), including the right to have your Personal Information deleted and the right to know the following:

- the categories of Personal Information we have collected about you;
- the categories of sources from which the Personal Information is collected;
- our business or commercial purpose for collecting or selling Personal Information;
- the categories of third parties with whom we share Personal Information, if any; and
- the specific pieces of Personal Information we have collected about you.

If you would like to exercise any of the foregoing rights, please provide us with the following information so that we can verify your identity and determine what Personal Information we have collected about you:

**Name**  
**(first & last):** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Relationship with Us:**

- ☐ Customer (or representative of a customer)
- ☐ Service provider (or representative of a service provider)
- ☐ Employee (current or past)
- ☐ Job applicant (current or past)
- ☐ Other (please explain): \_\_\_\_\_

**Right Exercised:**

- ☐ Know the categories of Personal Information we have collected about you
- ☐ Know the categories of sources from which Personal Information is collected
- ☐ Know our business purpose for collecting/selling Personal Information
- ☐ Know the categories of third parties with whom we share Personal Information
- ☐ Know the specific pieces of Personal Information we have collected about you
- ☐ Have your Personal Information deleted

Once you have completed the above, and signed below, please return this form to us via mail or email at:

Nucor Corporation  
1915 Rexford Rd,  
Charlotte, NC 28211  
Attn: CCPA Requests  
E-mail: CCPA@nucor.com

I represent and warrant that all of the information I have included in this form is true and accurate, that I am the individual I have represented myself to be herein, and that I am a resident of the state of California.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name