**DATA SUBJECT**

**APPLICATION FORM**

1. **Application Method**

You can use this form when you send your request to our Company regarding your rights listed in Article 11 of the Law on the Protection of Personal Data No. 6698 (“**Law**”) via one of the methods explained below pursuant to Article 13 of the Law and Article 5 of the Communiqué on Procedures and Principles of Application to Data Controller.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **APPLICATION METHOD** | **APPLICATION ADDRESS**  | **INFORMATION TO BE PRESENTED IN THE APPLICATION**  |
| 1. **Application in Written Form**
 | With wet signature application in person or through a notary public | Büyükbakkalköy Mahallesi Samandıra Yolu Sokak No: 30Maltepe / İstanbul  | The phrase “Personal Data Protection Law Information Request” shall be written on the envelope / notification. |
| 1. **Through Registered Electronic Mail (REM)**
 | With registered electronic mail (REM) address | effeffepeturunleri@hs01.kep.tr | The phrase “Personal Data Protection Law Information Request” will be written in the subject of the e-mail. |
| 1. **Application by E-Mail Address Registered in Our System**
 | By using your e-mail address registered in our company’s system | info@effeffe.com.tr | The phrase “Personal Data Protection Law Information Request” will be written in the subject of the e-mail. |
| 1. **Application by E-Mail Address Not Registered in Our System**
 | By using your e-mail address not registered in our company’s system, including mobile signature/e-signature | info@effeffe.com.tr | The phrase “Personal Data Protection Law Information Request” will be written in the subject of the e-mail. |

1. **Your Identity and Communication Information**

Please complete the following table so that we can contact you and verify your identity.

|  |  |  |
| --- | --- | --- |
| Name – Last Name | : |  |
| R.T. ID No / Passport No or ID No. For Other Nationalities | : |  |
| Residential Address / Business Address for Notification | : |  |
| Mobile Phone | : |  |
| Telephone Number  | : |  |
| E-mail Address | : |  |

1. **Your Relationship with Our Company**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Your Relationship with Our Company | : | Supplier / Business Partner  |  | Employee |  |
|  | Customer |  | Other  |  |

1. **Subject of Request**

|  |
| --- |
| Please explain your request regarding your personal data. Relevant information and documents must be attached to the application. |
|  |

1. **Please Choose the Method of Notification of Our Response to You**

I want the response to be sent to my mail address I provided in Section 2.

I want the response to be sent to my e-mail address I provided in Section 2.

In line with my requests above, I hereby request that the application I made to your Company to be evaluated pursuant to Article 13 of the Law and that I be informed thereof.

I hereby represent and undertake that the information and documents I provided in this application are correct and up-to-date, and that your Company may request additional information in order to be able to conclude my application, and that I have been informed that I might be required to pay the fee determined by the Personal Data Protection Board if my application requires additional cost.

**Applicant Data Subject (Data Owner):**

**Name – Last Name :**

**Application Date:**

**Signature:**