AGRAM TIS

REQUEST FORM FOR EXERCISING DATA SUBJECT RIGHTS

Personal data on data subject who wants to exercise rights with regard to the personal data protection*
Name and surname
VAT Reg No (Personal Identification Number)
Address of residence

Type of right in the domain of personal data protection you want to exercise (please circle the number)

1. *Right to data access*
2. *Right to data correction and completion*
3. *Right to restriction of automated data processing (if applicable)*
4. *Right to portability of your personal data or erasure of personal data (if applicable)*
5. *Right to withhold consent for personal data processing for marketing purposes*
6. *Right to object to or complain of personal data processing*

Note:

_____
Date

_____
Signature of data subject

Information on receipt of the request
Request received on
Name, surname and signature of the employee
Branch office / Sales unit