**(“EAE Makina Sanayi ve Ticaret A.Ş.”)**

**LAW ON PROTECTION OF PERSONAL DATA APPLICATION FORM**

**Application Type:**

The methods for the application of the real persons (“**Related Person**”) with the personal data processed pursuant to the Personal Data Protection Law Numbered 6698 (“**KVKK**”) to be filed before the data supervisor for the purpose of practicing their rights on the personal data are stated in “Principles and Procedures of Application to Data Supervisor” promulgated on the Official Gazette dated March 10, 2018 and numbered 30356.

Without prejudice to other methods to be determined by the Board, the application methods determined by EAE MAKINA considering the criteria of “being written” of our positive regulation for the related persons are stated as below. The related persons are entitled to file application by using any of the methods stated herein by taking this form as basis. In accordance with this, the Related Person may file application by

* Sending an e-mail message [**eaemakina@hs01.kep.tr**](mailto:eaemakina@hs01.kep.tr)with secure electronic signature, or
* By personally delivering application to Ikitelli OSB, Ziya Gokalp Mh. Eski Turgut Ozal Cd. No: 20**,** Istanbul with the wet-ink signature to be appended on this form, or
* through Public Notary.

The applications delivered to EAE MAKINA by using any of the above-cited methods shall be responded free of charge as a rule within no later than 30 days and in the shortest time possible based on the nature of the request and this response shall be delivered to the Related Person in written or on electronic environment. In the event that the request requires further cost, the fees to be determined by the Board shall be charged to the Related Person.

1. **Contact Information of the Related Person:**

|  |  |
| --- | --- |
| **Name:** |  |
| **For citizens of Republic of Turkey;**  **Republic of Turkey Identity Number:** | **For foreigners;** |
| **Nationality:** |
| **Passport Number:** |
| **Identity Number (if any):** |
| **Telephone number:** |  |
| **E-mail:** |  |
| **Address:** |  |

1. **Remarks related to the Relation of Related Person with the Corporation**

|  |  |
| --- | --- |
| Customer  Visitor  ☐ Former Employee  Current Employee  Candidate Employee | Business Partner  Other: …………………………………………………………….. |

1. **Request of the Related person within the scope of Art. 11 of KVKK:**

|  |
| --- |
|  |

1. **Method of Response for your Application**

I would like to response to be delivered by regular mail to my above-cited address.

I would like to response to be delivered to my above-cited e-mail address.

I would like to receive it personally.

1. **Signature of the Related Person (In case of application filed as hardcopy):**

Signature: Date: