

PERSONAL DATA PROTECTION LAW (PDPL) APPLICATION FORM

GENERAL DESCRIPTIONS

Data owners (the “**Applicant**”), who are defined in Personal Data Protection Law No. 6698 (the “**Law**”) as “**related person**”, are entitled to claim number of rights, specified in Art. 11 of the Law, from the data controller. In line with the first paragraph of Art. 13 of the Law, the applications must be delivered to the data controller, **ESASBURDA TURİZM VE İNŞAAT SANAYİ TİCARET ANONİM ŞİRKETİ** (TIN: 3230470431) (“**ESASGM**” or “**Company**”) in written.

You may submit your requests regarding your rights and the enforcement of the Law:

- By “Written” application filed by printing this form and posting its copy with wet signature to “**Rüzgarlıbahçe Mah. Çam Pınarı Sk. No:8 İç Kapı No:9 Beykoz/İstanbul**” notary or delivering it by hand.
- By sending an e-mail to info@esasgm.com.tr using the e-mail address notified to the Company by you and registered in the company system.

In your applications that you will submit without a printout of this form, name-surname, signature (in written applications), Turkish identification number (nationality, passport number or identification number, if any), place of residence or workplace address for notification, e-mail address, telephone and fax number. The presence of the elements subject to the request is mandatory in accordance with the “**Communiqué on the Procedures and Principles of Application to the Data Controller**”. Applications that do not fulfill such elements will be rejected by ESASGM or directed to the valid application channels.

In line with the second paragraph of Art. 13 of the Law, depending on the qualification, your request will be responded within 30 days from its arrival to ESASGM and the responds will be delivered to you in written or through electronic media.

ESASGM reserves the right to make changes about the application procedures in accordance with the committee resolutions and future legislation. If the Personal Data Protection Authority specifies else application methods, the clarification texts will be updated to include such application methods.

This application form is drafted in order to respond to your request correctly and in due time by determining your relationship with our Company and, if any, your personal data processed by our Company in precise. In order to eliminate the legal risks that may arise from illegal and unjust data sharing and to provide the security of your personal data, ESASGM reserves the right to demand additional documents (ID Card, passport, driving license, etc.) or information to check the identity and authorization.

If the information you conducted within the scope of the form is not correct or up-to-date or in case of an unauthorized application ESASGM declines any responsibility arising from the requests regarding the incorrect information or unauthorized application.



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A. Contact Information of The Data Subject

Full Name:	
Identification Number:	(Nationality&passport number or ID number for citizens of other countries)
Phone Number:	
E-mail:	
Fax Number:	
Residential or workplace address for notice:	

B. Relationship of Data Subject to the Company

☐ Job Applicant ☐ Former Employee ☐ Business Partner		☐ Third Party Company Employee ☐ OTHER:
The process that results in the processing of your personal data by the Company (<i>Although it is not mandatory to specify, your application can be finalized faster if you specify</i>):.....		
***Please fill in if you are a former employee: Years of Employment: Unit you worked in:	***Please fill in if you are a job applicant: Date of your job application: Method of the job application:	***Please fill in if you are a 3rd party company employee: Company title you work for: Your current position:

C. Details on Your Request Under The Law

[illegible]

..... In line with the requests, I have stated above, I kindly request that my application to your Company be evaluated in accordance with Article 13 of the Law and that I be informed.

D. The Method to be Selected to Notify You of the Response to Your Application

☐	I want it sent to my address by mail.
☐	I want it to be sent to my e-mail address <i>(selecting the e-mail method will result in a faster response)</i> .
☐	I want to receive it by hand <i>(In case of receipt by power of attorney, it is obligatory to submit a notarized power of attorney or certificate of authorization.)</i>
☐	OTHER:

Data Subject/Data Owner

Full Name	Date of Application	Sign