

## DATA OWNER APPLICATION FORM

### 1. GENERAL INFORMATION

Personal data owners identified as interested persons in the law on the protection of personal data No. 6698, 11. in the article, the right to make requests for the processing of personal data is granted.

In accordance with the first paragraph of Article 13 of the KVK Law; Applications to be made to our Company, which is the data controller, regarding these rights must be submitted in writing or by other methods determined by the Personal Data Protection Board.

### APPLICATION METHODS

Application Methods	Address to Apply	Informations in Application Submission
Personal Application	Elekse Ödeme Kuruluşu A.Ş. Merkez Mah. Ayazma Cad. No:37/91 Kağıthane-İstanbul	"Request for Information within the Scope of the Law on Protection of Personal Data" will be written on the envelope.
Application via Notary	Elekse Ödeme Kuruluşu A.Ş. Merkez Mah. Ayazma Cad. No:37/91 Kağıthane-İstanbul	"Request for Information within the Scope of the Law on Protection of Personal Data" will be written on the envelope.
Mobile Signature or E-mail Application	elekse@hs02.kep.tr	"Personal Data Protection Law Information Request" will be written in the subject section of the e-mail.

Your applications submitted to us will be answered within thirty days from the date your request reaches us according to the nature of the request in accordance with paragraph 2 of article 13 of the KVK Law. The answers will be delivered to you in writing or electronically in accordance with article 13 of the relevant KVK Law.

## 2. APPLICATION FORM

### Applicant Informations

Full Name:	
Identity Number:	
Cell Phone Number:	
E-Mail:	
Address:	

Indicate your relationship with the company.

<input type="checkbox"/> Customer	<input type="checkbox"/> Business Partner
<input type="checkbox"/> Visitor	<input type="checkbox"/> Others

<input type="checkbox"/> Former / Current Employee Working Period : __/__/____- __/__/____ <input type="checkbox"/> I am a Third Party Company Employee.	<input type="checkbox"/> Job Application / Resume Sharing Date : __/__/____ <input type="checkbox"/> Others
--	---

## Applicant's Rights

In accordance with Article 11 of the Law, the rights that the applicant may request from our Company, which is the data controller, are as follows.

Request Subject	CHOICE
I want to know if personal data is processed by your company..(KVKK m.11/a)	
If your company processes personal data about me, I request information about these data processing activities. (KVKK m.11/b)	
I would like to know the purpose of processing my personal data processed by your company and whether it has been used in accordance with its purpose. (KVKK m.11/c)	
If my personal data is transferred to third parties at domestic or abroad, I want to know who or who these third parties are. (KVKK m.11/ç)	
I think my personal data is incomplete or misproncted and I want it corrected. (KVKK m.11/d)	
Although my personal data has been processed in accordance with the law and other relevant provisions of the law, I believe that the reasons for its processing have disappeared and in this context my personal data; a) I request that it be deleted. b) I demand that it be made anonymous. (KVKK m.11/e)	
I want my personal data, which I think to be processed incompletely and incorrectly, to be corrected by third parties to whom it was transferred. Write your personal data that you want to be corrected in the blank space on the side, and send additional documents showing correct and complementary information. (KVKK m.11/f)	
I think that my personal data processed by your company are analyzed exclusively through automated systems and a result has arisen against me as a result of this analysis. I object to this conclusion. (KVKK m.11/g)	
I have been harmed by unlawful processing of personal data. I demand compensation for this damage. Write the issue subject to the illegality in the blank space on the side and send the supporting documents as an attachment.KVKK m.11/ğ)	

Please indicate your request under the KVK Law in detail:

.....

.....

.....

.....

.....

.....

.....

.....

Please choose the method by which you will be notified of our response to your application:

- ☐ I want it to be sent to my address.
- ☐ I want it to be sent to my e-mail address
- ☐ I want to receive it by hand..

Applicant Full Name :

Application Date :

Signature :