## **DATA OWNER APPLICATION FORM**

## 1. Application Method

As per article 13 of the Law and article 5 of the Communiqué on the Methods and Principles of Applying to the Data Controller, you can submit your request regarding your rights listed under Article 11 of the Law on the Protection of Personal Data No. 6698 (the "Law") to Zorluteks Tekstil Ticaret ve Sanayi Anonim Şirketi ("Company") with this form using one of the methods described below.

		APPLICATION METHOD	ADDRESS TO SUBMIT THE APPLICATION	INFORMATION TO BE SUBMITTED DURING THE APPLICATION
1.	Written	Applications in person	Levent 199, Büyükdere	The envelope shall bear the
	Application	with wet signature or	Caddesi No:199 34394	following information: "Request
		through Notary Public	Şişli/İstanbul	for Information under the Law on
		or via courier/post		the Protection of Personal Data".
2.	Via Registered	Via Registered	zorlutekstil@hs03.kep.tr	"Information Request within the
	<b>Electronic Mail</b>	Electronic Mail (REM)	•	scope of Law on the Protection of
	(REM)	address		Personal Data" shall be written in
				the subject line of the e-mail.
3.	Application	By means of using your	kvkzorlutekstil@zorlu.com	"Information Request within the
	Using the E-mail	e-mail address		scope of Law on the Protection of
	Address Existing	registered in our		Personal Data" shall be written in
	in Our System	company's system		the subject line of the e-mail.

## 2. Your Identity and Contact Information

Please fill in the fields below so that we can contact you and verify your identity.

Name - Surname:								
Turkish Republic Identity No./ Passport Number or ID Number for Other Country Citizens								
Residence Address / Workplace Address for Notification								
Mobile phone								
Telephone Number								
Fax Number	:							
E-mail address	:							
3. Your Relationship with Our Company								
Your relationship with our Company	:	Customer		Former Employee:				

	Employee:		Other:						
4. Subject matter of the request									
We kindly ask you clearly write your request regarding your personal data below. Information an documents regarding the subject matter should be attached to the application.									
5. Please Choose a Notifica	ntion Method								
I want the reply to be sent to the	postal address I p	rovided in sectio	n 2.						
I want the reply to be sent to the	e-mail address I p	provided in sectio	n 2.						
want the reply to be sent to the fax number I provided in section 2.									
Pursuant to the above-mentione be evaluated in accordance with	•	•							
I hereby represent and undert application are correct and up-to to finalize my application, and th Protection Board if an additional	-date, that your co at I may be requir	mpany may requ ed to pay the fee	est additional in	formation in order					
Data Subject Making the Applica	ation (Data Owner	·)							
Name and Surname : Date of Application :									
Signature :									