

APPLICATION FORM FOR DATA OWNERS

there are some rights for the people who has personal datas, by the Turkish law Nr. 6698 Law On The Protection Of Personal Data (KVKK) and eleventh article. If you want to use your rights according to law 13.. In accordance with the first paragraph of the article, send your application to our company which is responsible for the data by filling out this application form clearly and completely, or deliver a wet signed copy by hand or sent by a notary to the address given below.

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- After signing the "secure electronic signature", according to law 5070, please send this electronically secure signed form to the address given below by a recorded mail address.
sagtur@commodoreelite.com

We will respond to your request as soon as possible and within 30 days at the latest. We will contact you to clarify your request if your information and documents are incomplete or incomprehensible.

1. THE INFORMATIONS OF THE DATA OWNER

Name - Surname	
Republic of Turkey ID Number (Just for Turkish Citizens)	
Nationality and Passport Number / ID Number (For Non-Turkish Citizens)	
Telephone Number	
Place Of Residence / Address / Office-Work Address	
E – Mail Address	

2. YOUR RELATIONSHIP WITH OUR COMPANY

Please choose your relationship with our company from below.

<input type="checkbox"/> Guest	<input type="checkbox"/> Business partner
<input type="checkbox"/> Visitor	<input type="checkbox"/> Staff / Personel
<input type="checkbox"/> Other (Please write clearly)	

3. Application content (please specify in detail your request, according to the law and the personal data subject to your request. Please add the relevant information and documents to the application.)

4. Declaration of the applicant.

In accordance with the above requests, I request that my application regarding your company be evaluated in accordance with Article 13 of the law and that I was informed about it. I declare and undertake that the information and documents I have provided to you in this application are correct and up-to-date, that your company may request additional information to complete my application, and that I may also be required to pay the fee set by the management.

- I want it to be sent **by Post** to my specified address.
- I would like it to be sent to my specified **e-mail** address.

Owner of the application / Owner of the data

Name - Surname :
Application Date :
Signature :