

TURCAS KUYUCAK JEOTERMAL ELEKTRİK ÜRETİM ANONİM ŞİRKETİ
DATA SUBJECT APPLICATION FORM

1. Application Method

You may submit your inquiries regarding your rights enumerated in Article 11 of the Law on the Protection of Personal Data No. 6698 (“**Law**”) to the Company with this form by using one of the methods described below in accordance with Article 13 of the Law and Article 5 of the Communiqué on Principles and Procedures for Applications to the Data Controller .

	METHOD OF APPLICATION	APPLICATION ADDRESS	NECESSARY INFORMATION FOR APPLICATION
1. Written Application	Personal application with wet-ink signature or via Notary Public	Maslak Mahallesi, AOS 55. Sokak No:2/201 Sarıyer, İstanbul	“Request for Information Pursuant to Personal Data Protection Law” will be written on the envelop/ notification.
2. Registered Electronic Mail (KEP)	via registered electronic mail (KEP)	turcaskuyucak@hs02.kep.tr	“Request for Information Pursuant to Personal Data Protection Law” will be written in subject of the e-mail.
3. Application via Electronic Mail Address Available in Our System	By using your e-mail address registered in the system of our Company	info@turcas.com.tr	“Request for Information Pursuant to Personal Data Protection Law” will be written in subject of the e-mail.
4. Application Via Electronic Mail Address Not Available in Our System	By using your electronic mail address that is not available in our Company’s system provided that mobile signature/ e-signature is included	info@turcas.com.tr	“Request for Information Pursuant to Personal Data Protection Law” will be written in subject of the e-mail.

2. Your Identification and Contact Information

Please complete the following fields so that we can contact you and verify your identity.

Name- Surname	:	
T.R. Identification Number/ Passport Number or Identification Number for Foreign Nationals	:	
Residential Address/ Work Address for Notifications	:	
Mobile Phone	:	
Telephone Number	:	
Fax Number	:	

E-mail Address	:	
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3. Your Relationship with the Company

Your relationship with the Company	:	Customer	<input type="checkbox"/>	Former Employee:	<input type="checkbox"/>
		Employee:	<input type="checkbox"/>	Other:	<input type="checkbox"/>

4. Subject of Inquiry

<p>Please describe your inquiry about your personal data clearly in the field provided below. Relevant information and documents should be included into the application.</p>

5. Please Select Notification Method for Receiving Response

I request you to send your response to the mail address provided in Section 2.

I request you to send your response to the electronic mail address provided in Section 2.

I request you to send your response to the fax number provided in Section 2.

I hereby request you to process my application and provide me with the information in accordance with Article 13 of the Law and in parallel with my inquiries described above.

I hereby agree and undertake that information and documents I provided within the scope of this application are accurate and up-to-date; that the Company may require additional information in order to process my application and I have been informed that I may be charged fees determined by the Personal Data Protection Board in case additional costs are incurred.

Applicant (Data Subject)

Name Surname :

Date of Application :

Signature :