

ORBİT TEKSTİL DANIŞMANLIĞI SANAYİ VE TİCARET A.Ş.

Data Subject Access Request Form

1. Method of Application

Within the scope of the Turkish Personal Data Protection Law no. 6698 ("Law"), you can send your requests regarding the processing of your personal data to **Orbit Tekstil Danışmanlığı Sanayi ve Ticaret A.Ş. ("Company")** in order to use your rights as a data subject, as stipulated by Art. 11 of the Law in accordance with Art. 13 of the Law and Art. 5 of the Communiqué on the Procedures and Principles of Lodging an Application to a Data Controller using one of the methods described below.

	METHOD OF APPLICATION	ADDRESS – CONTACT POINT	REQUIRED INFO FOR APPLICATION
Written Applications	Wet-ink signature application in person or through notary public services	Mecidiye Mah. Tayyareci Fevzi Sk. No: 1 Beşiktaş/İstanbul	Please indicate on the envelope: "Data Subject Access Request under the Law No. 6698"
Through Registered Electronic Mail ("KEP")	Application sent using a registered electronic mail address		Please indicate in the e-mail subject line: "Data Subject Access Request under the Law No. 6698"
Applications Using an E-mail Address Already in Our Records	Application sent using your e-mail address, provided that it already exists in our records (through a subscription or other verified correspondence, etc.)	info@theorbitconsulting.com	Please indicate in the e-mail subject line: "Data Subject Access Request under the Law No. 6698"
Applications Using an E-mail Address Not in Our Records	Application bearing your mobile/electronic signature, sent using your e-mail address	info@theorbitconsulting.com	Please indicate in the e-mail subject line: "Data Subject Access Request under the Law No. 6698"

2. Identity and Contact Information

Please fill in the areas below so that we can get in touch with you regarding your application and verify your identity as a data subject.

Name-Surname	:	
Turkish Identity No / Passport No or Foreigner Identity No for Non-Turkish Nationals	:	
Address for Notification / Work Address	:	
Mobile Phone No	:	
Phone No	:	
Fax No	:	
E-mail Address	:	

3. Your Relation to Our Company

Please select one of the following or specify under "Other"	<ul style="list-style-type: none">• Job Candidate	<ul style="list-style-type: none">• Electronic Newsletter Subscriber
	<ul style="list-style-type: none">• Employee	<ul style="list-style-type: none">• Member
	<ul style="list-style-type: none">• Former Employee	<ul style="list-style-type: none">• Event Attendee
	<ul style="list-style-type: none">• Other (please specify):	

4. Subject of Your Request

Please clearly indicate your request below and attach to your application all information and documents relevant to your request.

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5. Response Method

- I'd like to receive the response at the mailing address I provided in Section 2.
- I'd like to receive the response at the e-mail address I provided in Section 2.
- I'd like to receive the response at the fax number I provided in Section 2.

In line with my requests indicated above, I would like for my application to be reviewed by the Company and to receive information in accordance with Art. 13 of the Law.

I hereby declare and acknowledge that the information and documents I have provided to you for this application are accurate and up to date, and that your Company may request additional information to finalize my application and that I may be required to pay the fee set by the Personal Data Protection Board, should the procedure require any additional costs.

6. Applicant Data Subject

Name-Surname	
Date of Application	
Signature	