
DATA SUBJECT APPLICATION FORM

1. Contact Information

For the purpose of identity verification and to contact you, please fill in the following fields.

Name: _____ Surname: _____
T.R. ID No: _____ Phone number: _____
E-mail: _____ Address: _____

2. Relationship with our company

Please indicate your relationship with our company.

Customer Former Employee Years of Service -.....
Partner Candidate/Job Applicant The date on which the resume was shared with us:
Visitor Third Party Employee Please indicate your company and job title.
Other Please Specify.

Please indicate the department you are in contact with in our Company.

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3. Please state your request for your personal data in detail below.

4. Please choose the notification method of our response to your application.

I want it to be sent to my delivery address.
I want it to be sent to my e-mail address.
(If you choose the e-mail method, we will be able to respond you faster.)
I want to pick it up in person.

(In case of the delivery by proxy, it is required to have a notarized power of attorney or certificate of authority.)

You, as a data subject, should include your name and surname, your signature if the application is in written form, your Turkish ID Number if you are Turkish citizen, your nationality and passport number (or if you have ID number) if you are foreigner, place of residence or business address to be based on notifications, your e-mail address and fax number, subject of the request in your application with respect to legal requirements regarding the applications to data controllers. In addition, you should add documents and information confirming the identity to your application.

In order for us to operate process in the most effective way for you, you should clearly and understandably indicate in your request which right you want to use and the details of the transaction you request.

We would like to emphasize that the subject of the request should be about the data subject itself. If the application is made on behalf of someone else, the person making the request should rely on a specially documented authorization for the requested transaction (power of attorney). Unauthorized applications will not be evaluated.

This application form has been prepared to identify your relationship with our Company and your personal data processed by our Company, if any, and to respond to your relevant application accurately and within the legal period. In order to avoid legal risks arising from unlawful and unfair data sharing and to ensure the security of your personal data, for identification and authorization our Company reserves the right to request additional documents and information (copy of identity card or driver license etc.). In case the information regarding your requests within the scope of the form is not correct and up-to-date, or an unauthorized application is made, our Company does not accept any liability for such wrong information or requests arising from unauthorized application.

You can send us this Form,

1. By sending with your wet signature and copy of your identity card to Kempinski Residences Astoria Towers Büyükdere Caddesi No: 127 Tower B Kat: 8 Esentepe Şişli / Istanbul / TURKEY,
2. By signing with secure e-signature or mobile signature and sending to rights.consent@cottgroup.com,
3. By applying in person with valid identity document to Kempinski Residences Astoria Towers Büyükdere Caddesi No: 127 Tower B Kat: 8 Esentepe Şişli / Istanbul / TURKEY.

Applicant's (Data Subject)

Name Surname:

Date of Application:

Signature: