DATA SUBJECT APPLICATION FORM

1. Application Method

You can send your requests within the scope of your rights set out in Article 11 of the Personal Data Protection Law No. 6698 ("Law") through any of the following methods detailed below by using this form pursuant to the Article 13 of the Law and the Article 5 of the Communique on the Principles and Procedures for Application to Data Controller.

F	Tocedures for Applica	A PRIME PALA CONTROLLER.	4001104710114000000			
		APPLICATION METHOD	APPLICATION ADDRESS	INFORMATION TO BE AVAILABLE IN THE		
		WILTHOD		APPLICATION		
				ATT LICATION		
f	1. Written	Personal application	Zorlu Center,	"Information Request		
	Application	with wet-ink	Levazım Mahallesi, Koru Sokak	Within the Scope of		
		signature through	No:2, 34340 Beşiktaş/Istanbul	Personal Data Protection"		
		notary public or		statement should be		
		cargo/mail		available on the		
				envelope/notice.		
	2. Registered	By using the	zorlutesisyonetim@hs03.kep.tr	"Information Request		
	Electronic Mail	registered electronic		Within the Scope of		
	(KEP)	mail (KEP) address		Personal Data Protection"		
				statement should be		
				available in the subject		
				line of e-mail.		
	3. Application	By using your	zorlucenterinfo@zorlu.com	"Information Request		
	with the	electronic mail		Within the Scope of		
	Electronic Mail Address	address is already		Personal Data Protection"		
	Address Available in Our	exist in our system		statement should be available in the subject		
	System			line of e-mail.		
	4. Application	By using your	zorlucenterinfo@zorlu.com	"Information Request		
	with the	electronic mail	zonacenterning@zonarcom	Within the Scope of		
	Electronic Mail	address is not		Personal Data Protection"		
	Address Not	already exist in our		statement should be		
	Available in Our	Company's system		available in the subject		
	System	together with a		line of e-mail.		
		mobile signature/e-				
		signature				

2. Your Identity and Contact Information

Please fill in the following fields in order to allow us to contact you and verify your identity.

:	
:	
:	
:	



Telephone No.	:				
Fax No.	:				
E-mail Address	:				
	4				
3. Your Relationship to U	Js				
Your Relationship to Our Company	:	Client		Employee	
		Former Employee		Other (Please specify)	
4. Subject Matter of Req	uest				
We kindly ask you to write documents related to the ma	-	•			ation and
5. Company You Want to	Appl	y for			
			<u> </u>		
Zorlu Tesis Yönetim And	onim	Şirketi			
6. Please Select A Metho want the response to be deliv		•	ess I provided in	n section 2.	
		ŕ			
want the response to be deliv	erec	to my electronic	c mail address I	provided in section 2.	
want the response to be deliv	/ered	d to my fax numb	er I provided in	section 2.	
n line with the requests I sta				my application to your C	Company
pursuant to Article 13 of the La hereby represent and undert his application are correct and order to finalize my application	ake t d up-	that my informat to-date, that you	tion and docum or Company ma	y request additional infor	mation in
Protection Board, if it is require		I may nav	- 10 00 010 000		
Applicant's (Data Subject)					
Applicant's (Data Subject) Name & Surname :					
Application Date :					

