Regulation (EU) 2016/679 provides the data subject with certain rights. This form is intended to facilitate the data subject's exercise of their rights.

Please specify which of your rights you wish to exercise:

 Right of access

 Right to rectification

 Right to erasure ("right to be forgotten")

 Right to restrict processing

 Right to data portability

 Right to object

Your request will be processed within the timeframes indicated below upon receipt of the completed request and identification of the applicant.

|  |  |
| --- | --- |
| **Data Subject Request** | **Defined Response Times** |
| Right of access  | Within one month |
| Right to rectification | Within one month |
| Right to erasure | Within one month |
| Right to restrict processing | Within one month |
| Right to data portability | Within one month |
| Right to object | Within one month |

**Details of the applicant:**

Please fill in your details:

|  |
| --- |
| **Last name:** |
| **Name:** |
| **Address:****Postal Code:** |
| **Date of Birth:** |
| **Contact telephone(s):** |
| **E-mail address:** |
| **To confirm my identity, the following copies are attached:**  **Birth Certificate** **Driving licence**   **Passport** **Other official document showing my details and/or address.** |

**Are you the data subject? (Please select the appropriate answer)**

 I am the Data Subject and I attach the required proof of my identity, e.g. photocopy of my driving licence, birth certificate, passport, marriage certificate.

 I am not the Data Subject, but I am acting on his/her behalf as his/her representative. Attached, the written authorization, as well as the required proof of his/her identity.

**Details of the Data Subject**

If you are not the data subject and you are applying for someone else, please fill in the data subject's details rather than your own.

|  |
| --- |
| **Last name:** |
| **Name:** |
| **Address:****Postal Code:** |
| **Date of Birth:** |
| **Contact telephone(s):** |
| **E-mail address:** |
| **To confirm the identity of the data subject, the following copies are attached:**  **Birth Certificate** **Driving licence**   **Passport** **Other official document showing my details and/or address.** |

**Proof of Identity:**

In order to proceed with any request, we require proof of your identity. Proof of your identity must include copies of two documents such as your birth certificate, passport, driving licence, other official document showing your details and/or address e.g. recent utility bills. The documents must include your name, date of birth and current address.

|  |
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| **Describe your request in detail:** Please provide as much detail as possible, such as dates, references, etc. |

**I wish the answer to my request to be:**

 in electronic form, and receive it by e-mail

 in hard copy, and receive it by post

 in hard copy, and to receive it in person

**Declaration of responsibility**

I declare responsibly that the information I have provided is correct and that I have the right to request and receive access to the aforementioned information, in accordance with the terms of the General Data Protection Regulation.

|  |  |
| --- | --- |
| **Signature:** | **Date of request:**  |
|  |  |

**Where to send the subject's request:**

info@elasticarchitects.com

The company shall process the data subjects' requests within 30 days of receipt of the written request. In exceptional cases where it is not possible to meet this deadline, you will be informed of the delay and given a timetable for the possible date of satisfaction of your requ