

	A.V.O.D. KURUTULMUŞ GIDA VE TARIM ÜRÜNLERİ SANAYİ TİCARET ANONİM ŞİRKETİ PERSON CONCERNED/DATA OWNER APPLICATION/REQUEST FORM	Document No	A-KVKK.P0.01
		Announcement Date	25.09.2020
		Revision Date/ No	--/00
		Page No	1 / 3

1. Application Method

You may convey your requests within the scope of your rights stated under Article 11 of the Protection of Personal Data Law numbered 6698 (the “Law”) as per Article 13 of the Law and Article 5 of the Regulation on the Principles and Procedures of Application to the Data Controller, to our Company with this form by one of the methods stated below.

	APPLICATION METHOD	ADDRESS TO APPLY	INFORMATION TO BE STATED IN THE APPLICATION
Written Application	Application in person or via Notary with the original signature	YILDIRIM MAHALLESİ 35 SOKAK NO:62-/- MENEMEN IZMIR	“Information Request within the Scope of Personal Data Protection Law” shall be stated on the envelope/notice.
Application via Registered Electronic Mail (REM/KEP)	By Registered Electronic Mail (REM/KEP)	avod@hs02.kep.tr	“Information Request within the Scope of Personal Data Protection Law” shall be stated in the subject loop of the e-mail
Application via Electronic Mail Address Registered in our System	By using your electronic mail address registered in the System of our Company	kvkk@avod.com.tr	“Information Request within the Scope of Personal Data Protection Law” shall be stated in the subject loop of the e-mail
Application via Electronic Mail Address which is not registered in our System	By using your electronic mail address, which is not registered in the System of our Company, including the mobile signature / e-signature	kvkk@avod.com.tr	“Information Request within the Scope of Personal Data Protection Law” shall be stated in the subject loop of the e-mail.

Your application that you have conveyed to us shall be responded to within thirty days as of the delivery of your request to our side, depending on the nature of your request, as per subparagraph 2 of Article 13 of the Law. Our response shall be conveyed to your side in writing or electronically as per the provision of Article 13 of the related Law.



**A.V.O.D. KURUTULMUŞ GIDA VE TARIM
ÜRÜNLERİ SANAYİ TİCARET ANONİM ŞİRKETİ
PERSON CONCERNED/DATA OWNER
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Page No	2 / 3

2. Your Identity and Contact Information

Please kindly fill in the following sections in order for us to contact you and verify your identity:

Name – Surname	:	
T.R. Identity Number / For Other Country Citizens Passport Number or Identity Number	:	
Residence Address / Work Place Address for Notices	:	
Mobile Phone	:	
Telephone Number	:	
Fax Number	:	
E-mail Address	:	

3. Please state your relation with our Company. (Such as customer, business partner, employee candidate, former employee, employee of third party company, shareholders)

<input type="checkbox"/> Customer	<input type="checkbox"/> Business Partner
<input type="checkbox"/> Visitor	<input type="checkbox"/> Other:
The Department that you are in contact within our Company:.....	
Subject:.....	

<input type="checkbox"/> I am a former employee Years that I worked:..... <input type="checkbox"/> Other:	<input type="checkbox"/> Job Application / I submitted my CV Date:..... <input type="checkbox"/> I am an employee of a third party company Please state the Company that you work with and your position title
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