

DATA REQUEST FORM

<p>As a data subject, you have the right to request access to the personal data that we may hold about you, as well as to request their rectification or erasure, the restriction of the processing of your personal data, and data portability. You also have the right to object to the processing of your personal data, as well as the right not to be subject to a decision based solely on automated processing, including profiling.</p> <p>In addition, if you have previously given your consent for the processing of your personal data and wish to withdraw it, you may use the form below.</p> <p>If you wish to submit any of these requests, please complete this form and send it to us by e-mail at <a href="mailto:contact@dposafety.ro">contact@dposafety.ro</a> or by post at the following address: Bucharest, District 1, Calea Dorobanți, no. 111-131, ground floor.</p> <p>Please include in the subject line of your e-mail, as applicable, one of the following phrases: <i>"Request for Withdrawal of Consent" / "Request for Data Access" / "Request for Data Rectification" / "Request for Data Erasure" / "Request for Restriction of Processing" / "Request for Data Portability" / "Objection to Data Processing" / "Request for Non-Automated Processing".</i></p>
<p>1. Full name of the data subject</p>
<p>2. Current address</p>
<p>3. Phone number</p>
<p>4. Details regarding the data subject to this request</p>
<p>5. In order to identify the information you are requesting, please specify in as much detail as possible what you require (e.g., copies of e-mails from the period ...). If we do not have sufficient details to identify the data to which your request refers, it may be impossible for us to respond.</p>

6. Type of request submitted	
<input type="checkbox"/>	Withdrawal of consent for processing
<input type="checkbox"/>	Access to data
<input type="checkbox"/>	Data rectification
<input type="checkbox"/>	Data erasure
<input type="checkbox"/>	Restriction of processing
<input type="checkbox"/>	Data portability
<input type="checkbox"/>	Objection to processing
<input type="checkbox"/>	Objection to automated processing, including profiling
7. Details regarding the request submitted (e.g., how you would like the data to be rectified; whether you wish to be informed about the recipients of your data in case you exercise your right to rectification, erasure, or restriction of processing; to whom you would like your data to be ported, or if you prefer that we provide them directly to you, etc.)	
8. Reason for submitting the request (you are not required to provide this information; however, there are situations in which, under the law, your request may be refused. In order for us to properly assess and respond to your request in the most satisfactory way, it is helpful if you let us know the reason, but only if you wish to do so).	
9. Should the response/information be sent to the data subject or to the representative?	
To the data subject <input type="checkbox"/> To the representative <input type="checkbox"/>	
If the response is to be sent to a representative, sections 11 and 12 must also be completed.	
10. I confirm that I am the data subject in relation to whom this request is made.	
Full name: _____	
Signature (only if submitted in physical form): _____	
Date: _____	
I hereby attach proof of my identity, including an official document. <i>Note: If I submit requests concerning video or photo images, I am required to attach an identity document with a photograph.</i>	

<p><b>11. (To be completed if “representative” was selected at point 9). The data subject (on whose behalf the request is made) must provide written consent for the response/information to be sent to their authorized representative.</b></p>
<p>I hereby give my consent for _____ to submit requests concerning my personal data.</p> <p>Full name of the data subject: _____</p> <p>Signature (only if submitted in physical form): _____</p>
<p><b>12. (To be completed if “representative” was selected at point 9) I confirm that I am the authorized representative of the data subject.</b></p>
<p>Name of the authorized representative and address to which the response to the request shall be sent: _____</p> <p>Full name: _____</p> <p>Signature (only if submitted in physical form): _____</p> <p>Date: _____</p>
<p><b>We will make every effort to resolve your personal data request as soon as possible, while respecting the legal deadline of 1 month.</b></p> <p><b>If you have any questions while your request is being processed, please do not hesitate to contact us at: <a href="mailto:contact@dposafety.ro">contact@dposafety.ro</a></b></p>