

ASSET MEDİKAL
APPLICATION FORM TO DATA CONTROLLER

1. General Remarks

Personal data owners (“Applicant”) defined as the relevant person in the Turkish Personal Data Protection Law no. 6698 (“PDPL”), have been granted the right to make certain requests regarding the processing of their personal data in accordance with Article 11 of the PDPL.

The application form has been prepared in order to determine your relationship with the **ASSET MEDİKAL TASARIM SANAYİ VE TİCARET A.Ş.** (“[ASSET MEDİKAL]”), and to fully determine your personal data processed by the [ASSET MEDİKAL], if there are any, and to respond to your application correctly and in the legal due time.

In order to ensure the security of your personal data and to prevent illegal data transfer, additional information may be requested by the [ASSET MEDİKAL] for identification and authorization determination purposes. In the event that the information given by the Applicant is not accurate and/or not up to date or the requests are unauthorized, the responsibility for this matter rests with the Applicant.

If the Applicant's application is to be answered in writing, up to ten pages are free of charge, pursuant to Article 7 of the Notice on Application Procedures and Principles to the Data Controller. A transaction fee of 1 Turkish Lira could be charged for each page over ten pages. If the response to the application is given in a recording medium such as a CD or a flash memory, a fee may be charged as much as the cost of the recording medium.

2. Scope of the Right to Apply under Article 11 of the PDPL

The Applicant may apply to [ASSET MEDİKAL] and request the following:

- 1) Learn whether or not her/his personal data have been processed;
- 2) Request information as to processing if her/his data have been processed;
- 3) Learn the purpose of the processing of the personal data and whether data are used in accordance with their purpose;
- 4) Know the third parties in the country or abroad to whom personal data have been transferred;
- 5) Request rectification in case personal data are processed incompletely or inaccurately; and request the rectification made in this context to be notified to the third parties to whom personal data has been transferred.
- 6) Request deletion, destruction, or anonymization of personal data even if it has been processed in accordance with the provisions of PDPL and other relevant laws, in case the reasons for processing no longer exists, and request the rectification made in this context to be notified to the third parties to whom personal data has been transferred to.
- 7) Object to occurrence of any result that is to her/his detriment by means of analysis of personal data exclusively through automated systems;

8) Request compensation for the damages in case the person incurs damages due to unlawful processing of personal data

3. Application Method

Pursuant to the first paragraph of Article 13 of the PDPL; applications related to these rights must be forwarded to us in written and signed form or by other means designated by the Personal Data Protection Board ("Board").

Written applications in this context, need to be accompanied by a print-out of this form;

- With the personal application of the applicant,
- Through public notary
- With registered electronic mail (REM) address, secure electronic signature, mobile signature or;
- It can be forwarded to us by e-mail sent by the Applicant from the same e-mail address previously notified to us and registered in our system.

Below is information on how to deliver written applications to us, specific to written application channels.

Application Method	Information to be specified in the Application Submission	Address to apply
Personal Application (Applicant comes in person and applies with a document proving his/her identity)	"Information Request Under the Law on Protection of Personal Data" will be written on the envelope.	İkitelli Organize Sanayi Bölgesi Mahallesi, 17. Cadde no:17,34480 Başakşehir/İstanbul
Through public notary notice	"Information Request Under the Law on Protection of Personal Data" will be written in the notification envelope.	İkitelli Organize Sanayi Bölgesi Mahallesi, 17. Cadde no:17,34480 Başakşehir/İstanbul
Via Registered Electronic Mail (REM) by signing with a "secure electronic signature"	"Personal Data Protection Law Information Request" will be written in the subject part of the e-mail.	asset@hs02.kep.tr

<p>Application by Mobile Signature or E-mail [Using the e-mail address previously notified to the data controller and registered in the data controller's system]</p>	<p>"Personal Data Protection Law Information Request" will be written in the subject part of the e-mail.</p>	<p>kvkk@assetmedikal.com</p>
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[ASSET MEDIKAL] will be able to request additional information and take the necessary measures to verify the identity of the Applicant in the applications that will be made by the Applicant via e-mail.

In accordance with the second paragraph of Article 13 of the PDPL, your applications submitted to us will be answered in writing or in electronic format within thirty days from the date of notification or receipt of your request, depending on the nature of the request.

4. Your Identity and Contact Information

A. Applicant Contact Information

Name	
Last Name	
TR Identity No / Passport No (if foreign)	
Phone	
E-mail	
Home or Work Address	

B. Please describe your relationship with [ASSET MEDIKAL] (For example, visitor, customer, business partner, employee, employee candidate, former employee, third party company employee, shareholder etc.)

<input type="checkbox"/> Visitor <input type="checkbox"/> Customer <input type="checkbox"/> Business Partner	<input type="checkbox"/> Employee <input type="checkbox"/> Employee Candidate <input type="checkbox"/> Former Employee <input type="checkbox"/> Other :.....
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Subject and the unit you are in contact in our company:

Unit:

Subject:

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5. Request

Please specify your request within the scope of PDPL in detail:

**Applicant Name -
Last Name:**

Signature (if written application):