

DATA SUBJECT APPLICATION FORM

You can submit your requests related to the rights listed in Article 11 of Law No. 6698 ("Law") through the methods and procedures explained in this Form.

Data Controller: BNS GIDA ve TURİZM HİZMETLERİ ANONİM ŞİRKETİ "SUSHICO"

You can exercise your rights using the methods and procedures outlined below.

	METHOD / PROCEDURE	ADDRESS	DESCRIPTION
Written Application	It can be done in person or through a Notary with a wet signature.	Küçükbakkalköy, Hazar Sk. No:17, 34758 - Ataşehir / İstanbul / Türkiye	The relevant information and documents listed in this form will be provided as required, and the envelope/notification of the application form will be labeled with "KVKK Data Subject Application."
Registered Electronic Mail (KEP) Application	It can be done via a Registered Electronic Mail (KEP) address.	bnsghda@hs01.kep.tr	The relevant information and documents listed in this form will be provided as required in the content of the KEP message, and the subject line will include "KVKK Data Subject Application."
Application via Email (e-mail)	It can be done via email created with a mobile signature/e-signature.	kvkk@sushico.com.tr	The relevant information and documents listed in this form will be provided as required in the content of the email, and the subject line will include "KVKK Data Subject Application."

If you submit your application in accordance with the procedures and principles specified in this form, your requests will be concluded as quickly as possible and no later than within thirty days, free of charge, depending on their nature. However, if the process incurs additional costs, a fee may be charged according to the tariff set by the Personal Data Protection Board.

Our responses will be delivered to you in written or electronic form. Therefore, please specify the channel through which you wish us to contact you and provide the relevant information as outlined below.

Name-Surname:	
Identification Number: (TCKN, Passport, etc.)	
Phone:	
Address:	
KEP Address:	
E-posta:	

I request that the response be sent to me using the method specified below (Please select one).

Registered Electronic Mail	Email	Address
()	()	()

To evaluate your request, please specify your relationship with our organization by answering the following information.

Reason for relation	a) Customer b) Visitor c) Business Partner d) Dealer e) Supplier f) Former Employee g) Job Applicant/ CV Submitter h) Other
Explanation (source of the relationship, the department you are in contact with, date, duration of the relationship,contract,etc.):.....	

Please specify your request in detail within the scope of your rights outlined in the first section of this form and under Article 11 of Law No. 6698 on the Protection of Personal Data, so that we can evaluate your application properly.

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CLARIFICATION TEXT

This application form has been prepared to determine your relationship with our Institution, respond to the requests included in your application, identify your personal data as the data subject within the scope of KVKK, and provide an accurate and timely response to your application in accordance with legal deadlines. Our Institution reserves the right to request additional information and documents for identity and authorization verification and for evaluating the application. The information and documents related to your requests must be submitted by an authorized person and must be accurate and up-to-date. In case of an unauthorized application or if the information provided is found to be incorrect or outdated, our Institution shall not be held responsible and reserves the right to reject the application. The information and documents provided in this form will be processed by our Institution solely for the purposes of evaluating, responding to, and finalizing applications made under Article 13 of the Law. The information obtained within the scope of this application may be collected in written, verbal, electronic, or physical form. In the course of the review process, the relevant information may be shared with our Institution, its subsidiaries, and third-party service providers, such as law firms, as necessary for the resolution of the application. You may exercise your rights under Article 11 of Law No. 6698 in accordance with the procedures and conditions specified in this form.

Application Date:

**Data Subject Name & Surname:
Signature:**