

# **REQUEST FOR IMPLEMENTATION OF RIGHTS**

Each of the rights listed below may be exercised by submitting this request at the address of our office or by proxy, as well as electronically by the order of the Electronic document and Electronic Certification Services Act, by e-mail <u>dpo@iteco.bg.</u> Please complete in block letters and tick "X" where necessary. Fields marked with \* are required for the application to be processed.

□ In Person

Proxy

(a copy of the power of attorney shall be enclosed)

## Subject's Data:

Name\*:

Date of birth\*:

Address for correspondence\*:

Phone:

Email:

#### With regard to:

- □ Right of access
- □ Right to correct
- □ Right to deletion ('right to be forgotten')
- □ Right to restrict data processing
- □ Right to objection
- □ Right to withdraw your consent
- □ Right to data portability
- □ Right to lodge a complaint

### **Description of the request\*:**

Please describe your request. In order to help you even more, we would like to know the reasons for it.

### Preferred way for feedback on the request\*:

- □ In writing to the correspondence address
- □ By phone
- □ By email

#### Date:

#### Signature: