## REQUEST FOR THE EXERCISE OF THE DATA SUBJECT'S RIGHTS

Please fill out this form in order to notify us of a request to exercise your rights in the field of personal data protection.

Data subject's data:

	APPLICANT	DATA ON THE PERSON WHO REPRESENTS THE APPLICANT, ATTORNEY (attach a power of attorney, fill in if the applicant is represented by a third person)	LEGAL REPRESENTATIVE, GUARDIAN (Attach the decision on guardianship)	
Name and surname				
Pin				
E-mail address				
Address				
Request expland				
With this request, you are seeking to exercise the Right to access personal data.				

## You can submit your request to us in the following ways:

- via e-mail: zastita-op@mobilisis.hr
- via mail SICK Mobilisis d.o.o., with headquarters in Jalkovec, Varaždinska ulica Odvojak II 7 (for the Data Protection Officer)
- in person, at the headquarters of SICK Mobilisis d.o.o.

□The right of access
□The right to data portability
□The right to rectification
□The right to object
□The right to erasure ("right to be forgotten"
☐The right to restriction of processing

SICK Mobilisis d.o.o., with headquarters in Jalkovec, 7 Varaždinska ulica – Odvojak II, PIN: 33760705978, will use the data collected in this form exclusively for the purpose of acting on this request, in accordance with the provisions of the General Data Protection Regulation (Regulation (EU) 2016/679). Providing personal data in this form is voluntary, but if you do not provide the data we need, we will not be able to respond to your request. We will keep the personal data collected in this form for two years from the date of receipt, unless there is another legal basis for their processing that provides for a longer retention period. In order to act on this request, we have the right to request additional information to confirm the identity of the applicant or the person representing them. In case of inability to confirm the identity, we have the right to refuse to act on this request. Regarding the processing of your personal data, you have the right to exercise the following rights: the right of access, the right to rectification, the right to erasure, the right to restriction of processing. To exercise these rights, you can contact our data protection officer. If you believe that the processing of your personal data does not comply with the regulations on personal data protection, you have the right to file a complaint with the Croatian Personal Data Protection Agency (www.azop.hr).

Applicant's handwritten signature	Date	Place

By signing this Request, you confirm that you are aware that you will receive an answer for the requested exercise of rights within 30 days of submitting the request to the address specified above. Exceptionally, taking into account the complexity and number of requests being processed, this deadline may be extended, of which you will be notified in due time. By signing this request, you confirm that you are the applicant and that the information and statements given in this request are true and correct.

INFORMATION ON RECEIPT OF REQUEST (Filled out by SICK Mobilisis d.o.o.)			
Date of receipt of request	Name and surname		