

REQUEST FORM FOR THE EFFECTUATION OF RESPONDENT'S/USER'S RIGHTS

Data on the person (respondent) who would like to effectuate rights in regards to protection of personal data*

Name and surname

OIB (personal identification number)

Address of residence/stay

Type of right in the domain of personal data protection you would like effectuated (please circle a number)

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1. The right to access data
 2. The right to correct and supplement data
 3. The right to limit automated data processing (if applicable)
 4. The right to the transfer or delete personal data (if applicable)
 5. The right to refuse consent for the processing of personal data for marketing purposes
 6. The right to file an objection or complaint about the processing of personal data

Note

Date

Respondent's signature

Information on the receipt of the request

Request received on

Name, surname and signature of employee