

DATA SUBJECT ACCESS REQUEST UNDER THE PERSONAL DATA PROTECTION LAW NO. 6698

To facilitate the processing of your request under the Personal Data Protection Law ("PDP Law"), we kindly ask you to fill out the application form below accurately and comprehensively, and submit the form, bearing your wet signature, via mail to Borusan Holding Anonim Şirketi at the address: Pürtelaş Hasan Mah. Assembly Mebusan Cad. No. 37 Beyoğlu/İstanbul.

We will be responding to your application promptly and within a maximum period of 30 days. Should the information and documents provided be incomplete or unclear, we will reach out to you for clarification.

1. IDENTITY AND CONTACT DETAILS OF THE DATA SUBJECT

First and Last Name:	
Turkish ID Number:	
Telephone Number:	
Address:	
E-mail:	
Application Submitted to:	
Your Relation to the Company	<i>(Customer, business partner, prospective employee, former employee, third party company employee, shareholder, etc.)</i>

2. DETAILS REGARDING THE SELECTION OF THE RIGHT TO BE EXERCISED BY THE DATA SUBJECT

(Please check the box(es) next to the statement that aligns with your request)

<input type="checkbox"/>	I would like to find out whether your company processes my personal data.
<input type="checkbox"/>	If my personal data is processed by your company, I request information regarding these data processing activities.
<input type="checkbox"/>	If my personal data is processed by your company, I would like to find out about the purpose of such processing and whether it is used for the intended purpose of processing.
<input type="checkbox"/>	If my personal data has been transferred domestically or internationally to third parties, I seek disclosure of the identities of these third parties.
<input type="checkbox"/>	I believe that my personal data is incompletely or inaccurately processed, and I would like to request the rectification of it.
<input type="checkbox"/>	Although my personal data has been processed in accordance with the PDP Law and other applicable legislation, I would like my personal data to be erased.
<input type="checkbox"/>	I request that my personal data, which I believe has been incompletely or inaccurately processed, be also corrected by the third parties to whom it has been transferred.
<input type="checkbox"/>	I request that my personal data, which I demanded to be erased, be also erased by the third parties to whom it has been transferred.

I am under the impression that my personal data processed by your company has been exclusively analyzed through automated systems, leading to unfavorable outcomes for me. I formally object to those outcomes.

3. CLARIFICATION REGARDING THE REQUEST (Please provide further details regarding your request under the PDP Law and the personal data referred to in your request.)

4. ANNEXES

Please list the documents, if any, that would support your application.

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5. PLEASE INDICATE THE PREFERRED METHOD FOR RECEIVING NOTIFICATIONS REGARDING OUR RESPONSE TO YOUR APPLICATION:

- I prefer to receive it by postal mail to my address.
- I prefer to receive it by e-mail to my e-mail address.
- I prefer to receive it by hand, in person.

6. APPLICANT’S STATEMENT

This application form is designed to establish your relationship with our Company, if applicable, to comprehensively identify the personal data processed by our Company, and to ensure a precise and lawful response to your application within the legally stipulated timeframe. Our Company reserves the right to request additional documents and information (such as a copy of your identity card or driver's license) for identification and authorization purposes, in an effort to mitigate legal risks associated with unlawful and unfair data sharing, with a specific emphasis on safeguarding the security of your personal data. If the information pertaining to your requests submitted through this form is found to be inaccurate, outdated, or an unauthorized application is identified, our Company disclaims any liability for the consequences arising from such inaccuracies or unauthorized submissions. You shall bear full responsibility for any unlawful, misleading, or false applications.

Data Subject / On Behalf of The Data Subject¹

First and Last Name :
Date of Application :
Signature :

¹ If you are submitting an application on behalf of someone else, please include supporting documents demonstrating your authorization to apply (e.g., a document indicating parental/guardianship rights over the data subject, power of attorney, etc.) in the attachment of the application form. To be considered valid, these documents must be issued or approved by competent authorities.