



BITES DEFENCE
APPLICATION FORM UNDER KVKK
(LAW ON PROTECTION OF PERSONAL DATA)

You may claim your rights listed in Article 11 of the Law Nr. 6698 on Protection of Personal Data (“KVKK”/ “the Law”) to BITES Savunma Havacılık ve Uzay Sanayi Yazılım Elektronik Ticaret A.Ş. (“BITES”) through one of the following methods pursuant to Article 5 of the Communiqué on Principles and Procedures for Application to Data Controller and Article 13 of the Law.

In this context, this form should be printed out for any applications to our Company and should be submitted to us through one of the following methods or other methods specified by the Board for the Protection of Personal Data.

Method of Application	Apply To:	Required Information on Application:
Personal application with original signed document and identification card	Contact Person: Ahmet Serhat ERSOY, Mustafa Kemal Mahallesi, ODTÜ Teknokent Bilişim İnovasyon Merkezi, 280/G Kat:4 No:14 Dumlupınar Bulvarı Çankaya- Ankara	Envelop should write “Information Request about the Law on Protection of Personal Data”.
Notification through notary public	Mustafa Kemal Mahallesi, ODTÜ Teknokent Bilişim İnovasyon Merkezi, 280/G Kat:4 No:14 Dumlupınar Bulvarı Çankaya- Ankara	Envelop should write “Information Request about the Law on Protection of Personal Data”.
Through Registered Electronic Mail (KEP) (via electronic mail address that has been previously notified to our company and registered on database, with a secure electronic signature or mobile signature).	BITESsav@hs01.kep.tr	Subject should write “Information Request about the Law on Protection of Personal Data”.

Pursuant to Article 5 and Article 13 of the Law, your applications received by our party shall be replied “as soon as possible and at latest within 30 (thirty) days” **as from the receipt of such request**, depending on the nature of request. Our replies will be notified to your party in written or electronically without any charges pursuant to Article 13 of the Law. However, if such an action imposes extra costs, fees may be charged as included in the tariff specified in Communiqué on Principles and Procedures of Application to Data Controller by the Board for the Protection of Personal Data by BITES Savunma Havacılık ve Uzay Sanayi Yazılım Elektronik Ticaret A.Ş.

A. Contact Information of Applicant

Please fill in the following fields so that we can contact you and verify your identity:



**BITES DEFENCE
APPLICATION FORM UNDER KVKK
(LAW ON PROTECTION OF PERSONAL DATA)**

Name:	
Surname:	
Turkish ID Number: (If foreigner, Foreign ID or Passport Number and Nationality)	
Notification Address:	
E-mail Address for Notifications:	
Telephone/Fax/GSM Number:	
Relation with Company (Employee, Customer, Former Employee, Employee Candidate etc.)	

B. Please specify your request as per the Law in details.

C. Please select the method of notification for response to your application.

- Send response to my address.
- Send response to my electronic mail address.
- Send response to my fax number.

I hereby request your Company to assess my application as per Article 13 of the Law and inform me in accordance with the aforementioned requests.

I hereby declare and undertake that information and documents provided with this application are correct and current and your Company may request further information to conclude my application and that I have been duly clarified that I might have to pay the fees specified by the Board for the Protection of Personal Data if any extra charges occur.

D. Attachments

If there is any document and information to serve as basis for your application, you may use this Application Form to submit them.



**BITES DEFENCE
APPLICATION FORM UNDER KVKK
(LAW ON PROTECTION OF PERSONAL DATA)**

Applicant's (Personal Data Subject's)

Name, Surname :

Date of Application :

Signature :