

Data Subject Request Form

This form should be used to submit a data subject request under the provisions of the European Union General Data Protection Regulation (GDPR).

Submitter details

TITLE	
NAME	
ADDRESS	
CUSTOMER / ACCOUNT NO	

Type of request

SELECT THE TYPE OF REQUEST YOU ARE MAKING
<input type="checkbox"/> Consent withdrawal
<input type="checkbox"/> Access request
<input type="checkbox"/> Rectification of personal data
<input type="checkbox"/> Erasure of personal data
<input type="checkbox"/> Restriction of processing of personal data
<input type="checkbox"/> Personal data portability request
<input type="checkbox"/> Objection to processing of personal data
<input type="checkbox"/> Request regarding automated decision making and profiling

PERSONAL DATA INVOLVED**REQUEST DETAILS****REQUEST REASON / JUSTIFICATION****SIGNATURE****NAME****DATE**

Once completed, this form should be emailed to:

privacy@alcatraz.ai

or posted to:

8 Dimitar Mollov Str., 1750 Mladost 1,
Sofia, Bulgaria

