PRO MASK PRODUCTS s.r.o.
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Company ID (IČO): 281 59 047
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GDPR FORM

Data Subject Request Regarding Personal Data

APPLICANT

The undersigned, first name and surname _____

Residence _____

I HEREBY REQUEST

Please tick what you are requesting. You may select more than one option.

- ☐ **Access to my personal data**
  Upon your request, we will issue a confirmation containing information on the processing of your personal data.
- ☐ **Rectification of my personal data**
  Upon your request, we will correct or supplement incorrect or outdated personal data that we process.
- ☐ **Erasure of my personal data**
  Upon your request, we will erase your personal data, provided that the legal conditions are met.
- ☐ **Restriction of processing of my personal data**
  Upon your request, we will only store your personal data and will not process it further, provided that the legal conditions are met.
- ☐ **Portability of my personal data**
  Upon your request, we will provide you with your personal data in electronic form as an XML file.

NOTIFICATION OF THE OUTCOME

- ☐ in the same manner as I am submitting this request
- ☐ in another manner: _____

Notice: We will process your request without undue delay, at the latest within one month. We may extend this period by an additional two months, of which we will inform you. If we do not process your request within this period, you may lodge a complaint with the Office for Personal Data Protection of the Czech Republic and seek a remedy in court.

Notification of the outcome of your request will be provided to you in the same manner in which the request was submitted, unless you request another method. Your request is processed free of charge. In the case of repeated, manifestly unfounded or excessive requests, we may charge a reasonable administrative fee or refuse to act.

Place and date _____

Signature of the data subject _____