**Data Subject Request Form**

In accordance with the Legal Framework for Data Protection, you have the right to know which of your personal data we hold and process, as well as the right to request correction of your data. Under the conditions laid down by law, you also have the right to request erasure, restriction of processing and to object to automated processing. You may exercise these rights upon written request in any form. However, in order to make it easier for you to submit a complete request, which will allow us to respond in a timely manner, we advise you to use this form. Our response will be addressed to you or to the third party you may authorize to act on your behalf. You will need to provide us with proof of your identity. We will process your request within 30 calendar days of receiving the fully completed form and proof of your identity.

**Proof of identity:** You need to provide us with proof of your identity in order for us to be able to process your request. Your proof of identity should include a copy of an identification document, e.g. personal ID, passport, residence permit.

**Administrative fee:** Information and copies of the personal data subject to processing are provided free of charge. If the data subject requests additional copies of his personal data being processed or if the request of the data subject is unfounded or excessive, especially due to its repetitive nature, the Company reserves the right to refuse to act upon the request or to request a reasonable request administrative fee, which will be determined on a case-by-case basis.

Please do not use this form to obtain general information or to submit requests other than those relating to personal data.

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| 1. **Data Subject Details** | | | | | | |
| **Name:** |  | | | | | |
| **Surname:** |  | | | | | |
| **Email:** |  | | | | | |
| **VAT:** |  | | | | | |
| **Phone number:** |  | | | | | |
| 1. **I attach the following copies as proof of my identity** *(mark with an X)* | | | | | | |
| **Id** |  | **Passport** |  | **Residence Permit** | |  |
| **Other** |  | | | | | |
| 1. **Relationship with the Company:** *(mark with X) or fill in* | | | | | | |
| Leasing prospect customer 🞏 Existing Leasing Customer 🞏  Rent-A-Car prospect customer 🞏 Existing Rent-A-Car Customer 🞏  Used Cars Sales prospect customer 🞏 Existing Used Cars Sales Customer 🞏  Employee / former employee 🞏 Supplier 🞏  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **Subject of request:** *(mark with X)*  *(for additional information about your rights please see the Company's Privacy Policy)* | | | | | | |
| I would like to know if my personal data are being processed | | | | |  | |
| I would like to gain access to my personal data | | | | |  | |
| I would like to request correction of my personal data | | | | |  | |
| I would like to request the erasure of my personal data | | | | |  | |
| I would like to request restriction of the processing of my personal data | | | | |  | |
| I would like to request the portability of my personal data | | | | |  | |
| I would like to exercise my right to object to the processing of my personal data | | | | |  | |
| I would like to ask for human intervention, express an opinion or challenge a decision based on automated processing | | | | |  | |
| **Please provide us with additional information about your request:** *(please be as specific as possible to complete your request as quickly as possible)* | | | | | | |
| **Please provide us with any information known to you, which will help us to locate your data and handle your request:** *(in particular, note relevant dates and documents you may have as well as details of persons with whom you have contacted)* | | | | | | |

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| **Data Subject Statement** | | | |
| I declare on my own responsibility that the information I provide to the Company is accurate and true. I understand that the processing of my identification data is necessary for the processing of my request. Therefore, I accept the above processing and agree to provide additional information to the Company, if these are necessary for the examination and processing of my application. | | | |
| **Name / Surname:** |  | | |
| **Signature:** |  | **Date:** |  |

**Please send the completed form and proof of identity documents electronically to** [gdpr@avis.gr](mailto:gdpr@avis.gr)

**Or by post to the following details:**

Avis Budget Greece

47, Vasileos Georgiou Ave – Chalandri, 15232, Greece

Consider DPO