



**Subject Access Request Form**

**\*Before you proceed to the completion of this application form, please read carefully the instructions included in the Appendix**

**A. Personal information**

|                       |  |
|-----------------------|--|
| Surname/ Family name: |  |
| First Name:           |  |
| Address:              |  |
| Zip code:             |  |
| Phone number:         |  |
| ID card:              |  |
| Email address:        |  |

**B. Data Subject's status/relationship with the Company**

In order to validate your personal data, please fill in the following according to the category you belong:

|   |
|---|
| <p><u>Which is your relationship to the Company (Please fill in with X):</u></p> <p>Employee: <input type="checkbox"/></p> <p>Client: <input type="checkbox"/></p> <p>Supplier/Vendor: <input type="checkbox"/></p> <p>Collaborator: <input type="checkbox"/></p> <p>Other: <input type="checkbox"/></p> <p>If you chose the "Collaborator" or "Other" category please fill in the kind of relationship that you have with our company: .....</p> |
|---|

**C. Request**

Please describe the actions you require the Company to perform in relation to your personal data

**D. Further information for your request**

|   |     |    |
|---|-----|----|
| Are you seeking information about a specific event or period of time? | YES | NO |
|---|-----|----|

If "YES" please fill in the following:

|                          |  |
|--------------------------|--|
| Specify the event:       |  |
| Specify the time period: |  |

**E. Declaration**

I.....hereby declare that I have read and I accept the Access Request Form’s terms. I also, confirm that the personal data given to the Company are accurate. I understand that the company has the right to verify my personal data and to request additional information if needed for verification purposes.

Signature: .....

Date: .....

Please return the completed form to the following address:

Data Protection Officer  
 email: [DPO@helleniq.gr](mailto:DPO@helleniq.gr)  
 Phone number: 210 6302252  
 Address: 8A Chimarras str., GR 151 25-Maroussi

**F. Request form on behalf of the Data Subject**

If you are making this request on behalf of someone else, please provide a power of attorney, complete the following information about yourself and the data subject and sign the above declaration:

**Representative’s personal data**

|                       |  |
|-----------------------|--|
| Surname/ Family name: |  |
| First Name:           |  |
| Address:              |  |
| Zip code:             |  |
| Phone number:         |  |
| ID card:              |  |
| Email address:        |  |

**Data Subject's personal data**

|                       |  |
|-----------------------|--|
| Surname/ Family name: |  |
| First Name:           |  |
| Address:              |  |
| Zip code:             |  |
| Phone number:         |  |
| ID card:              |  |
| Email Address:        |  |

## **Appendix – Terms of Access Request Form**

1. The form must be accompanied by all the necessary information/documentation in order to enable the Company to respond to your request.
2. If the criteria are met, the request is forwarded to the IT department, which will assess whether there is a technical complexity that may affect the respond time with the risk of failing to meet the deadline of thirty (30) days as it is set by GDPR. In case, the request is complex for the Company's IT Systems and requires more than twenty (20) days, the IT Department will inform the DPO in order to notify the Data Subject for a two-month extension. Otherwise, the process proceeds with the response to the request.
3. The data subject who submits the designated form needs to provide the following documents:
  - Proof of identity (National identity card, driving license, passport etc.)
  - Proof of address (Utility bill, phone bill)

In case the Data Subject authorizes a representative to submit the form, the necessary documents are the following:

- Power of attorney from a lawyer or any other public authority
  - Representative's Identification proof (ID card, driving license, passport etc.)
  - Address confirmation document of the data subject (Utility bill, phone bill)
4. The data subject may submit a request for exercising his/her rights in three different ways:
    - He/ She can visit the Company's headquarters in order to submit the designated form
    - Via the official company's web site (<http://www.helpe.gr>)
    - Via Courier or post, including the aforementioned identification documents
  5. The data subjects may not submit their request form in ways other than the aforementioned (e.g. via email, social media etc.).