

FORM FOR THE USE OF RIGHTS RELATING TO PERSONAL DATA

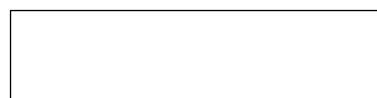
Information About the Data Subject Demanding Use of Rights Relating to His/Her Own Personal Data:

Name and Surname:			
Turkish Identity Nr:			
Tax Identity Nr:			
E-mail:			
Phone:			
Address:			
Relationship with the Bank:	<input type="checkbox"/> Customer/ Authorized Officer of a Customer/ Shareholder of a Customer	<input type="checkbox"/> Business Partner/ Authorized Officer of a Business Partner /Shareholder of a Business Partner	<input type="checkbox"/> Supplier/ Authorized Officer of a Supplier/ Shareholder of a Supplier
	<input type="checkbox"/> Visitor	<input type="checkbox"/> Employee of a Supplier/Business Partner	<input type="checkbox"/> Employee Candidate
	<input type="checkbox"/> Ex-Employee	<input type="checkbox"/> Guarantor	<input type="checkbox"/> Other:.....
	Full title of the legal entity that you work for (if any):		
Name of the Branch, to Which the Application is Made (If Any):			
The Right Subject to Use: <i>(Please choose from the list.)</i>	<input type="checkbox"/> (1) To learn whether your personal data are processed or not <input type="checkbox"/> (2) To request information if your personal data are processed <input type="checkbox"/> (3) To learn the purposes of data processing and whether such data are used for intended purposes <input type="checkbox"/> (4) To know the third parties to whom the personal data are transferred at home or abroad <input type="checkbox"/> (5) To request the rectification of the incomplete or inaccurate data, if any <input type="checkbox"/> (6) To request erasure or destruction of the personal data <input type="checkbox"/> (7) In case the personal data are corrected, erased or destroyed, to request notification of such operations carried out to third parties to whom the personal data have been transferred <input type="checkbox"/> (8) To object to the processing, exclusively by automatic means, of his personal data, which leads to an unfavourable consequence		

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	for the data subject <input type="checkbox"/> (9) To request compensation for the damage arising from unlawful processing of the personal data		
Explanations Relating to the Application:			
Please Mark Your Preference for Communication of Any Response:	<input type="checkbox"/> Mail	<input type="checkbox"/> E-mail	<input type="checkbox"/> KEP (Registered Electronic Mail)

You could complete this form and send it to the below stated address of our Bank by **registered mail** or through **notary public**. You could also make your application to the branch nearest to you. In addition, you could sign this form with your secured electronic signature and send it to [kvkkbasvuru@teb.com.tr] or to [turkekonombankasi@hs03.kep.tr] from your Registered Electronic Mail (KEP) account.

You must fill in the form completely in order for your application to be responded in time. In particular, if you request the use of rights with the number 5, 8 or 9 on the form, you must fill in the explanation section of the form and provide necessary information and evidences, if any. Otherwise, you will be requested to complete the missing information first in order to be responded. This may extend the period of responding to your application.

In addition, you can send your petition in written stating your request clearly to our branches or via your e-mail address that you have previously notified to our bank and registered in our systems, or by another method included in the Communiqué on Application Procedures and Principles to the Data Controller published by the Data Protection Authority.

You may be required to fulfil certain identification verification requests in order for the application result to be delivered to you. Our Bank does not bear any liability from losses that may arise out of your providing inaccurate information in this form.

If you are applying by proxy, please attach your notarized proxy to this form.

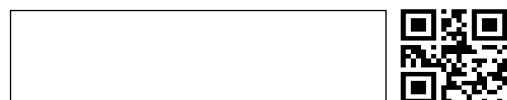
You could find detailed information relating to the subject on our Bank's website (www.teb.com.tr).

Delivery Address for the Application:

Türk Ekonomi Bankası A.Ş.
Müşteri Memnuniyeti Departmanı
Yukarı Dudullu Organize San. Bölgesi
1.Cad.No:17 34776 Ümraniye / İstanbul

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TEB

CUSTOMER NAME SURNAME / TITLE:

DATE : ___/___/___

STAMP / SIGNATURE:



Türk Ekonomi Bankası A.Ş.

TEB Kampüs C ve D Blok Saray Mah. Sokullu Cad. No: 7A-7B Ümraniye/İSTANBUL

Ticaret Sicil No: 189356 Mersis No: 0876004342000105 www.teb.com.tr

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