

# 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**

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**REQUEST DETAILS**

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**REQUEST REASON / JUSTIFICATION**

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<b>SIGNATURE</b>	
<b>NAME</b>	
<b>DATE</b>	

Once completed, this form should be emailed to:  
[privacy@alcatraz.ai](mailto:privacy@alcatraz.ai)

or posted to:  
8 Dimitar Mollov Str., 1750 Mladost 1,  
Sofia, Bulgaria

