

Data Subject Request Form

This form must be used to submit a data subject request in accordance with the provisions of the European Union General Data Protection Regulation (GDPR).

Submitter Details

Full name:	
Address:	
Contact Phone:	
E-mail:	

Request Type

Select the type of request you make:

- Consent Withdrawal
- □ Access Request
- □ Correction of personal data
- Correspondence of Personal Data
- Restriction of processing of personal data
- Personal data portability request
- □ Objection to the processing of personal data
- □ Request regarding automated decision-making and profiling

Personal Data Involved

Request Details

Reason/Justification of Request

Signature:	
Date:	

This form should be submitted to the email address <u>info@zampouris.gr</u> or to the postal address:

ZAMPOURIS S.E. , KALOCHORI LAND AREA 0, EXEDOROU / THESSALONIKI, P.C. 57009 2310753551