## **Subject Access Request Form**

Please provide the following information in connection with your request. This form is not mandatory but it will help Katun provide a quick and accurate response to your request. For further information about your data protection rights please see our Privacy Notice.

Please complete the information below and return the form by post or email to the Data Protection Officer:

Laurie Young c/o Katun Corporation 10951 Bush Lake Road Bloomington, Minnesota, 55438 USA

Or Email: Laurie.young@katun.com

1. Information of Req	uestor
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Fitle:
Surname:
Name:
Address:
Felephone number:
Email address:
Relationship to Katun:

## 2. Your Request

Please provide an explanation of the information you are requesting. We can usually respond quicker where more detail is provided:

Date range for information request: (Please note, we only retain records to the maximum time period allowed by law)



## 3. Proof of Identity

**Declaration** 

Katun will only release information about the individual requesting information to the person named in the request or their authorized representative. Therefore, Katun will require proof of identity of the person named in the request, as well as proof of authorization and identity of any representative.

Please send a photocopy of one form of government issued identification containing a photograph and signature along with this form to the Data Protection Officer. If there are any issues with providing such documentation, please contact the Data Protection Officer to discuss alternatives.

Katun will contact you as soon as possible if there are any issues with Katun's ability to satisfy itself as to your identity.

## 4. Correction and Erasure of Information

If you wish to request that Katun corrects or erases any information following our response to your request, please contact the Data Protection Officer.

and hereby request,	, am the data subject named above or their authorized representative, under the provisions of Article 15 of the EU General Data Protection Regulation, e with copies of any personal data as described in Section 1.
I have included with	his request the relevant proof of identity.
Name:	
Signature:	
Date:	(day, month, year)

