



REQUEST FORM FOR THE EXERCISE OF DATA SUBJECT RIGHTS

DATA SUBJECT (*)

Mr/Ms _____
_legal _____ age, _____ with _____ address _____ in _____
_____ City _____ ZipCode _____
email _____

holder of identity card number/NIE/Passport _____ (attach the official document with the request).

LEGAL REPRESENTATIVE (*)

Mr/Ms _____
_legal _____ age, _____ with _____ address _____ in _____
_____ City _____ ZipCode _____
email _____

holder of identity card number/NIE/Passport _____ (attach the official document with the request), acting on behalf of _____, pursuant the authorization attached, in accordance with the provisions laid down in Articles 15 to 22 of the General Data Protection Regulation (GDPR).

REQUESTS exercise his/her right (please, mark the option desired):

- Right of Access
- Right of Rectification
- Right to Erasure ('right to be forgotten')
- Right to restriction of processing
- Right to data portability
- Right to object
- Right not to be subject to a decision based solely on automated processing, including profiling

Subject matter of his/her exercise of rights (Please, explain the grounds and personal data concerned)

In the event of Data Portability, please identify the new Data Controller.



Personal data provided shall be processed confidentially by INNOVATIVE MULTICHANNEL TECHNOLOGIES SL as Data Controller, with the aim to manage this request, according to the data protection legislation in force. For more information about the processing of their personal data or know their rights, please visit our Privacy Policy (<https://imbee.me/en/privacy-policy/>) or contact to our Data Protection Officer (dpo@imbee.me).

Note: Please, submit this request with a copy of your official Identity Card and, when applicable the official document of the person on behalf you are acting and his/her authorization.

Date: In____, ____ , _____, _____

Signature: