

FORM FOR EXERCISING THE RIGHT OF ACCESS

MR./MS		
with address at		
town/city/municipality of, P and with e-mail address	Postal Code, w here	vith ID Number by exercises the
RIGHT OF ACCESS to personal data, in accord	ance with the provisions of a	rt. 13 of the <i>Ley</i>
Orgánica 3/2018, de 5 de diciembre, de Prot	ección de Datos Personales y	garantía de los
derechos digitales and the article 15 of the	e Regulation (EU) 2016/679 o	of the European
Parliament and of the Council of 27 April 2016 of		_
to the processing of personal data and on the Directive 95/46/EC (General Data Protection Re		a, and repealing
REQUESTS:		
To be provided with the right of ACCESS to processing activities:	your personal data relating	to the following
In addition, to be notified of the of the outcome	e of the application in the:	
Postal address above		
E-mail address above		
In the event that it is decided that the requeste he/she be notified of this, with reasons, at the to lodge a complaint with the competent supervision.	address previously selected, in	•
In, the of	of	
Sign	ned	

DATA PROTECTION OFFICER

Festina Lotus SA Via Layetana 20, 4th floor 08003 Barcelona (Spain)