**Request by the data subject concerning his or her personal data**

Signed below Name and surname: ......................................... ................................

Residence: ................................................ .................................................. ......................

I hereby request Chilli Manufaktura s. r. o., Jókaiho 331/46, 946 51 Nesvady, IČO: 52 570 185 / check what you are asking for /

* access to my personal data (based on your request, we will issue a confirmation with information about the processing of your personal data);
* correction of my personal data (based on your request, we will correct or supplement incorrect or outdated personal data that we process);
* deletion of my personal data (based on your request, we will delete your personal data if the legal conditions are met);
* restrictions on the processing of my personal data (based on your request, we will only store your personal data and will not continue to work with them as long as the legal conditions are met);
* transfer of my personal data (based on your request, we will provide you with your personal data in electronic form as an XML file).

I request notification of how the application will be processed as follows:

* in the same way as I make this request;
* otherwise: ............................................... .......

Instruction: We will process your request without undue delay within one month at the latest. We can extend this period by another two months, of which we will inform you. If we do not process your request within this period, you can file a complaint with the Office for Personal Data Protection and apply for redress in court. We will provide you with a notification on how the application will be processed in the same way as the application was submitted, unless you request another method. We process your request free of charge. In the event of a repeated manifestly unfounded or disproportionate request, we may charge a reasonable administrative fee or refuse to act.

In .........................., date ....................

Signature of the person concerned: ...........................................