

REQUEST FOR WITHDRAWAL OF CONSENT FOR PROCESSING

ON PERSONAL DATA

1. Applicant

Name and surname	
Phone	
Address of residence	
Email	

2. Category of personal data subject to which you belong: (Please indicate the corresponding field)

- employee
- employment applicant
- external collaborator
- buyer
- another category of personal data subject:

(specify category)

3. Description of the request for withdrawal of consent

- Pursuant to Article 11 of the LPDP, I inform you that I withdraw my consent to personal data are processed (specify personal data and processing to which this request applies)

4. Documents that I submit to confirm my identity:

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I confirm that all information and data in this application is correct

I understand that it is necessary for Fokus Nikola DOOEL to establish my identity.

Warning - A person who will introduce himself / herself as another person or will try to posed as another person, may bear criminal responsibility.

Signature: _____

Date: _____

Submit the completed application to the following address:

Controller - for Personal Data Protection Officer

Controller : Fokus Nikola DOOEL

Address: Jadranska magistrala 203, 1020 Skopje, Karposh

Name and surname :Ljupco D.

or by e-mail: privacy@icomply.mk