Bld. Aviatorilor nr. 92, Sector 1, Bucureşti office@erste-am.ro Tel: +40 0372 269 999; Fax: +40 0372 870 995 www.erste-am.ro

Nr. inreg. ORC J40/17060/07.10.2008 CUI RO 24566377 Capital social 6.000.000 RON

Decizia CNVM nr. 98/21.01.2009 Nr. PJR05SAIR400028 din Registrul ASF Nr. Registru General ANSPDCP: 0017716

General Data Protection Regulation (GDPR) Right of Access Form Right of Access as per Art 15 GDPR

Request statement	
Iwould hereby like exercise my right of access as per GDPR Art 15 and request the personal data t	to hat
SAI Erste Asset Management S.A. is currently processing for me.	
2. Identification	
Iam	
□ data subject	
□ legitimate representative of a data subject	
I am aware that it is required to perform a thorough identity check prior to execution the request. Therefore, I am providing the appropriate identification documents.	า of
Please fill in the details of the data subject. If you are not the data subject and you are apply on behalf of someone else, please fill in the details of the data subject below and not your o	_
I'm providing the following documents of the data subject:	
□ National identity card	
□ Passport	
□ Other:	
Please fill in the details (of the data subject).	
Title: Mr Mrs Other:	
Surname/ Family Name:	
First Name(s)/Forenames:	
Date of Birth:	



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Αc	ddress:
Zi	p Code:
La	andline phone number(s) :
M	obile phone number:
Er	mail
	In case of questions, please contact me via
	Landline phone
	Mobile phone
	Email
	you are NOT the data subject, but an empowered person, please provide evidence of your entity as well as that of the data subject and proof of your right to act on their behalf.
A۶	s I'm a legitimate representative of the data subject, I'm providing:
	the copy of power of attorney
	national identity card
	passport
	other
ΡI	ease fill in details for the representative of the data subject if applicable
Sı	urname/ Family Name:
Fi	rst Name(s)/Forename(s):
Da	ate of Birth:
Αc	ddress:
Zi	p Code:
La	andline phone number(s) :
M	obile phone number:



C----:1.

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⊏r	naii:							
	In case of questions, please contact me via							
	Landline							
	Mobile							
	Email Email							
	3. Interactions with SAI Erste Asset Management S.A.							
	n requesting the access to my personal data from SAI Erste Asset Management S.A. I have or used to have the following relations with SAI Erste Asset Management A.							
	Current customer							
	Former customer							
	Job applicant							
	Current employee							
	Former employee							
	Other (please specify)							
	4. Format and communication channel of results							
	Please select your preference below							
	Electronic copy of data to be sent to (email adress)							
	Hard copy of data to be delivered to the following address							

Response deadline

I am aware that according to GDPR Art.12 p.3 the response has to be provided within one month after submission of the request. However, the deadline can be extended by SAI Erste Asset Management S.A. by up to an additional two months in case of large volume of the request or large number of requests being processed in parallel.



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I confirm that I have read and understood the terms of this form and certify that the information given in this application is true. I understand that more detailed information can be requested in order to locate the correct personal data.

Signat	ture, L	ocatio	n, Da	te:		



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Data subject identity verification

This page is to be filled by SAI Erste Asset Management S.A. employee.

Please verify contact details of the data subject found in the above form.

Contact details	Match?	Value in the system if no match			
Title		•			
Surname/ Family Name					
First Name(s)/Forenames					
Date of Birth					
Address					
Zip Code					
Landline phone number(s)					
Mobile phone number					
Email					
 Based on the above verification the data subject identity was confirmed 					

Email		
David and and a series of the first of	. 1.1 1.	
 Based on the above verification the unambiguously 	e data subj	ject identity was confirmed
□ Based on the above verification, the unambiguously. Further identity verification		•
Signature, Location, Date:		
Signature, Location, Date:		

