

Official Disclaimer

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**Request to Exercise the Right to Access my
Personal Data**

The societe anonyme under the name "**NEQUS REPRESENTATIVE OF INSURANCE AND REINSURANCE COMPANIES SOCIETE ANONYME**" and the distinctive title "NEQUS REP S.A " which is based in Nea Smyrni, Attica, on 171 Syngrou Avenue, hereafter referred to as "the Company", is responsible for the processing of your personal data. The Company's primary value is respect for the client and the creation of a trusted relationship, which is why we have set as a strategic goal the guarantee of maximum protection of your personal data and we consider it our duty to inform you about your rights regarding the collection and processing of your personal data and to facilitate your exercise.

Procedure

If you wish, you can fill in and send this application directly:

- a) Via email at dpo@nequsrep.com
- b) By means of a postal item marked "DPO" to "**NEQUS REPRESENTATIVE OF INSURANCE AND REINSURANCE COMPANIES SOCIETE ANONYME**" , Syngrou ave 171, Nea Smyrni, Attiki, P.C. 17121. We will respond to your request within one month of receipt if this is feasible, otherwise we will notify you of any extension of the deadline.

Identification

The Company is required before a request is made to identify the applicant. For this purpose, you must attach a certified copy of the ID card or equivalent document.

Right

I wish:

- Confirmation, if the Company processes my personal data.
- Additional information regarding my personal data processed by the Company in particular:
 - processing purposes,
 - categories of personal data,
 - recipients or categories of recipients of my personal data,
 - my rights,
 - the amount of time my data is stored,

 - the existence of automated decision-making, including profiling and information concerning the process followed, its importance, and thereby likely consequences.
 - if and in what way my data is being shared to other countries.
 - A copy of the following personal data:
 - 1).....
 - 2).....
 - 3).....
 - 4).....
 - 5).....

I, the undersigned _____ hereby acknowledge that the information I provide through this application is true and accurate and that I am the subject to which the personal data relate. I understand that the Company must confirm my identity and contact me if necessary in response to my request.

DATE _____

SIGNATURE
