

ERASURE REQUEST FORM

This form is to be used by the person whose data are being processed in order to exercise its Right of Erasure in accordance with the General Data Protection Regulation.

Applicant's personal details	:	
Title:		
Full Name:		
Address:		
Type of request: Reque Personal data being process	st to exercise the Right of Erasure	



Details of the request:		
Reasons for the reques		
reasons for the reques	•	
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I further request that I I	be informed of the recipients of the process of my personal data.	
Please reply to my abov	ve request, which reply is to be sent to the abovementioned postal addre	ess and/oi
email address.		
Signature:		
Full Name:		
Date:		

In order to exercise the aforementioned right you should send the completed form to the following email address: info@seanergy.gr.