

### Data Subject Rights Request Form

According to Personal Data Protection Act B.E. 2562 (2019), a data subject is entitled to exercise the rights on his/her personal data that **Premier Technology Public Company Limited and its subsidiary** ("the Company") may hold. The information required on this form is necessary to fulfill your request.

If the data subject wishes to exercise the data subject rights, please fill in all information required in this form and proceed as instructed by the Company.

**Notification** (You should ensure that you read and understand the notification before completing this form)

1. Please provide clear and complete details of the personal data that you wish to exercise your rights for the Company's consideration and/or effective fulfillment of your request. The Company will fulfill your request or notify the result of consideration of your request within 30 days from the date the Company receives the completed form, or within the period specified by law, or within other reasonable period of time.

2. The Company reserves the right to inquire or request for additional documents e.g. copy of identification card or copy of passport in order to verify your identity in exercising the rights.

3. You hereby consent for the Company to collect, use or disclose personal data you have provided in this form for the purpose of considering and/or fulfilling of your request.

4. The Company will notify the result of consideration of your request via email, phone message, postal letter or other channels according to the contact information you provided.

#### Part 1. Details of Data Subject

Name-Surname: \_\_\_\_\_ ID card /Passport number: \_\_\_\_\_

Contact number: \_\_\_\_\_ E-mail: \_\_\_\_\_

#### Contact address

House No.: \_\_\_\_\_ Building/Village: \_\_\_\_\_ Village No.(Moo): \_\_\_\_\_ Alley/Lane(Soi): \_\_\_\_\_ Road: \_\_\_\_\_

Sub-district: \_\_\_\_\_ District: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

#### Part 2. Details of guardian of the Data Subject

In case the data subject is a minor (person under the age of 20 years old) /an incompetent person\* / a quasi-incompetent person\* (\*as defined by law)

Name-Surname of a parental holder/custodian/curator : \_\_\_\_\_

ID card /Passport number: \_\_\_\_\_ Contact number: \_\_\_\_\_ E-mail: \_\_\_\_\_

#### Relationship with the data subject

the parental holder (minor)     the custodian (incompetent person)     the curator(quasi-incompetent person)

#### Part 3. Detail of Request

Relationship between the Data Subject and the Company

Partner     Customer     Current employee     Intern  
 Former employee     Former intern     Job applicant     Visitor  
 Others (please specify) \_\_\_\_\_

#### Part 4. The Right(s) requested by the Data Subject

**Remark : Please indicate which right(s) you wish to request by marking '✓' in the appropriate box or boxes and fill in the relevant details below**

List of the Rights	Details of Personal Data you wish to exercise the rights (e.g. address, contact number, name-surname etc.)	Purpose of the processing of Personal Data you wish to exercise the rights for which the Company previously asked for your consent or notified you	Details of Exercising Rights
<input type="checkbox"/> 1. Withdrawal of consent			Please specify reason(s): _____ _____
<input type="checkbox"/> 2.1 Access to Personal Data <input type="checkbox"/> 2.2 Obtaining a copy of Personal Data <input type="checkbox"/> 2.3 Disclosure of the acquisition of Personal Data			Channel to access/obtain a copy of Personal Data ( ) Send to the Data Subject by e-mail as specified in Part 1 ( ) Send to the Data Subject by post as specified in Part 1 ( ) In person
<input type="checkbox"/> 3. Rectification of Personal Data			From (Please specify) : _____ Change to (Please specify) : _____ _____
<input type="checkbox"/> 4.1 Erasure of Personal Data <input type="checkbox"/> 4.2 Destruction of Personal Data <input type="checkbox"/> 4.3 Anonymization of Personal Data			Ground for the request ( ) no longer necessary to retain such Personal Data for the purposes of collection ( ) data processing consent being withdrawn ( ) data processing being objected ( ) Unlawful data processing
<input type="checkbox"/> 5.1 Data portability to other personal data controllers  <input type="checkbox"/> 5.2 Obtaining of Personal Data <input type="checkbox"/> 5.3 Obtaining of Personal Data sent or transferred to other personal data controllers			Transfer to (Please specify name/details of other personal data controllers): _____ _____ Channel to obtain a copy of Personal Data (only 5.2-5.3) ( ) Send to the Data Subject by post as specified in Part 1 ( ) Send to the Data Subject by e-mail as specified in Part 1 ( ) In person

List of the Rights	Details of Personal Data you wish to exercise the rights (e.g. address, contact number, name-surname etc.)	Purpose of the processing of Personal Data you wish to exercise the rights for which the Company previously asked for your consent or notified you	Details of Exercising Rights
<input type="checkbox"/> 6. objection to the Personal Data processing		<input type="checkbox"/> For direct marketing <input type="checkbox"/> For performing task carried out for the public interest or exercising of official authority vested in the Company <input type="checkbox"/> For scientific/statistic research <input type="checkbox"/> For legitimate interests of the Company	
<input type="checkbox"/> 7. Restriction of the use of Personal Data			Ground for the request <input type="checkbox"/> pending the Company's examination process to rectify the Personal Data as requested <input type="checkbox"/> pending the Company's examination or verification process with regard to the exercising of the right to objection as requested <input type="checkbox"/> no longer necessary to retain such Personal Data for the purposes of such collection but the data subject has necessity to request for data retention <input type="checkbox"/> the Personal Data which should be erased or destroyed, but the data subject requests the restriction of the use of such Personal Data instead (Please specify) :

**Additional Details of Exercising Rights (if any) Remark :** Please provide any additional information of the above request e.g. document name/source of personal data to be exercised, document date, details of personal data that you wish to exercise the rights and other details in the box below for the Company to properly process your request

I have read, understood and accepted that my request to exercise such rights may prevent me from using, receiving services, receiving information, receiving various offers of goods or products (as the case may be) or others from the Company in some parts. I further acknowledge that my request to exercise such rights is subject to the scope and conditions of the Personal Data Protection Act B.E. 2562 (2019) and other relevant laws. I hereby certify that the information I have provided in this form including supporting documents for identity verification and any other documents sent to the Company is true and correct in all respects.

Signature of Data Subject /Representative of Data Subject: \_\_\_\_\_ Date of Request: \_\_\_\_\_

*If you have any inquiries about this form, please contact our data protection officer at E-Mail : [DPO\\_PT@pt.premier.co.th](mailto:DPO_PT@pt.premier.co.th)*

**For Staff Members of the Company Only**

Request Form No. (DSAR#): \_\_\_\_\_ Date of Receipt of Request: \_\_\_\_\_

Name of Staff of the Company receiving the Request: \_\_\_\_\_

Approve to proceed with the request

Disapprove/Reject the request

Please specify the reason: \_\_\_\_\_

Name of authorised person to approve/disapprove the request: \_\_\_\_\_ Approval/Disapproval Date: \_\_\_\_\_

Name of executing staff: \_\_\_\_\_ Execution Date: \_\_\_\_\_

Name of staff notifying the status of Request to Data Subject: \_\_\_\_\_ Notification Date: \_\_\_\_\_

In case that the Company rejects to proceed as requested by Data Subject, the Company has recorded its rejection together with supporting reasons in the Company's record as prescribed in Section 39 of the PDPA

Record Date: \_\_\_\_\_ Recorder: \_\_\_\_\_