

## **DATA PROTECTION COMPLAINT FORM**

Data Pr	rotection Local Contact:	
	SIB (Cyprus) Limited	
	dataprotection@sib.com.cy,	
	tel: 0035722419000,	
	Address: 27 Pindarou street, Alpha Business Center, Block B, 1st floor,	1060 Nicosia, Cyprus
Date of	submission: MM/DD/YYYY	
Name:		
Contac	t details:	
Positio	n of the complainant:	
	☐ Job candidate	
	□ Employee	
	☐ Former employee	
	□ Supplier/Contractor	
	□ Website user	
	□ Customer	
	☐ Other:	_ (please specify)
Locatio	on:	
Current	location of the complainant(City, Country)	
Location	n of the violation(City, Country)	
Compla	aint:	
	e describe your complaint, including as much detail as possible to help SIB igate and resolve the matter.	(Cyprus) Ltd to