	Data Sul	oject 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 Tamarind Village Co., Ltd ("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 or 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					
	Villa	age No.(Moo): Alley/Lane(So	i):Road:		
Sub-district: Dis	trict:	Province:	Postal Code:		
Part 2. Details of guardian of the Da	ta 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/custodiar	/curator :				
	Con	tact number:	E-mail:		
Relationship with the data subject					
the parental holder the cust (minor) person)		curator(quasi-incompetent on)			
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 th	e Data Subject				
Remark : Please indicate which right(s)					
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		
1.Withdrawal of consent			Please specify reason(s):		
2.1Access to Personal Data					
2.20btaining a copy of Personal Data 2.20btaining a copy of Personal Data 2.3Disclosure 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		
3.Rectification of Personal Data			From (Please specify) :		
			Change to (Please specify) :		
4.1Erasure of Personal Data			Ground for the request		
4.2Destruction of Personal Data			 () no longer necessary to retain such Personal Data for the purposes of collection () data processing consent being withdrawn () data processing being objected 		
5.1Data portability to other personal data controllers			() Unlawful data processing Transfer to (Please specify name/details of other personal data controllers):		
5.20btaining of Personal Data 5.30btaining of Personal Data sent or transferred to other personal data controllers			Channel to obtan 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	Purpose of the processing of	Details of Exercising Rights		
	wish to exercise the rights	Personal Data you wish to			
	(e.g. address, contact	exercise the rights for which the			
	number, name-surname etc.)	Company previously asked for			
		your consent or notified you			
6.objection to the Personal Data		() For direct marketing			
processing		() For performing task carried out			
		for the public interest or exercising			
		of official authority vested in the			
		Company			
		() For scientific/statistic research			
		() For legitimate interests of the			
		Company			
7.Restriction of the use of Personal Data			Ground for the request		
			() pending the Company's examination process to rectify the		
			Personal Data as requested		
			 pending the Company's examination or verification process with regard to the exercising of the right to objection as 		
			requested		
			() 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		
			() 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) :		
			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 th	at my request to exercise such	rights may prevent me from using	receiving services, receiving information, receiving		
			her 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	e of Data Subject:		Date of Request:		
If you have any inquiries about this form, please contact our data protection officer at E-Mail : DPO_TAM@tam.premier.co.th					
For Staff Members of the Company Only					
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Request Form No. (DSAR#):	D	ate of Receipt of Request:			
· · · · · · · · · · · · · · · · · · ·		·····			
Name of Staff of the Company receiving the R	.equest:				
Approve to proceed with the request					
Disapprove/Reject the request					
Please specify the reason:					
·······					
Name of authorised person to approve/disapp	rove the request:	Α	pproval/Disapproval Date:		
Name of executing staff:		Evocution Data			
Name of executing staff:		Execution Date:			
Name of staff notifying the status of Request to Data Subject: Notification Date: Notification Date:					
In case that the Company rejects to proceed as requested by Data Subject, the					
Company has recorded its rejection together w					
Company's record as prescribed in Section 39		Record Date:	Recorder:		