

Request Form for the Exercising the Right to Withdraw Consent

Srithai Superware Public Company Limited

Details of the Requester

Full Name:

Address:

Contact Number:Email:

Are You the Data Subject?

☐ The requester is the same person as the data subject.

I have attached the following documents to verify the identity and address of the requester, in order to enable the Company to accurately process the requested rights.

Identification and/or Address Verification Documents

☐ Copy of National Identification Card or Passport

☐ Copy of House Registration Document

☐ Utility Bill (e.g., water or electricity bill)

☐ Other (if any):

☐ The requester is an authorized representative of the data subject

Data Subject Information

Full Name:

Address:

Contact Number:Email:

¹Note: The Power of Attorney must meet the following requirements:

1. The content must, at a minimum, authorize the requestor to: submit a request to the data controller for access to or a copy of the data subject's personal data; request disclosure of the source of the personal data for which no consent was given by the data subject; and undertake any related actions until completion.
2. It must be clearly signed by the grantor of the authority.
3. It must be dated prior to the date of submission of the request

I hereby attach the following documents for the purpose of verifying the authority, identity, and residence of both the requestor and the data subject, in order to enable the Company to accurately and lawfully proceed with the request:

☐ Power of Attorney (required)

Identification and/or Address Verification Documents

☐ Copy of National Identification Card or Passport

☐ Copy of House Registration Document

☐ Utility Bill (e.g., water or electricity bill)

☐ Other (if any):

The Company reserves the right to request additional information or documentation from the requester if the information initially provided does not clearly demonstrate that the requester is the data subject or has the legal authority to submit the request. The Company further reserves the right to reject the request if such verification cannot be reasonably established.

Personal Data for Which Consent Withdrawal Is Requested

By submitting this document, I hereby withdraw the consent previously given to Srithai Superware Public Company Limited, and request that the Company cease the collection, use, and disclosure of my personal data as specified below:

☐ All personal data collected, used, and disclosed based on my consent

☐ Only specific personal data collected, used, and disclosed based on my consent, as follows: _____

☐ All purposes for which consent was the legal basis for the collection, use, and disclosure of my personal data

☐ Only the following purposes: _____

I acknowledge and accept that withdrawing my consent may result in my inability to use certain services, receive information, or be offered certain products, services, or communications from the Company (as the case may be), until I provide consent again.

Company's Processing Procedures

Upon your notification of consent withdrawal, the Company will cease the collection, use, and disclosure of your personal data based on the consent you previously provided for processing purposes. The Company will also instruct its representatives and/or data processors to suspend such activities accordingly. However, under the provisions of the Personal Data Protection Act, the withdrawal of consent will not affect the collection, use, or disclosure of personal data that has already been processed based on your consent. In some cases, the withdrawal of your consent may result in your inability to receive information or updates regarding products and/or services.

By submitting this form, the Company will use the personal data you have provided to process your consent withdrawal request. This data may be disclosed within the Company or to its contractors or service providers solely for the purpose of fulfilling your consent withdrawal request.

In witness whereof, I have signed this form as evidence.

SignedRequester

(.....)

Date:

For Official Use Only

For Personal Data Protection Officer Use

Date of Request Received: _____

Date Recorded in System: _____

Assessment Outcome

Date of Response: _____

Accepted / Rejected and Reason: _____

Processing Fee (if any): _____

Date of Action Taken: _____

Processed by: _____