

GENERAL DATA PROTECTION REGULATIONS SUBJECT ACCESS REQUEST FORM

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SECTION 1 – APPLICANT (TO BE COMPLETED IN ALL CASES) Please place a tick in the box for one of the following:

I am requesting access to my personal information I am requesting information on behalf of someone else

SECTION 2 - PERSONAL INFORMATION (TO BE COMPLETED IN ALL CASES)

Surname:	
Forename:	
Title Mr/Mrs/Miss/Mss/Other:	
Date of Birth:	
Address:	
Telephone Number:	
Email Address:	
Previous Names:	
Previous Addresses:	

SECTION 3 - REPRESENTATIVE'S INFORMATION (completed if you are applying on someone else's behalf)

Relationship to the person you	
are requesting information for:	
Surname:	
Forename:	
Title Mr/Mrs/Miss/Ms/Other:	
Address:	
Telephone Number:	
Email Address:	

Please use the sections below to explain your entitlement to receive someone's personal data (for example, signed authority, Lasting Power of Attorney or Parental Responsibility) Proof of your entitlement will be required



SECTION 4 – SERVICE AREA Please provide details of specific information you require, together with relevant dates

Details of specific information required	Dates information relate to

SECTION 5 – IDENTIFICATION

You must provide **two** forms of identification to confirm the identity of the person whose information is to be released, one which confirms their identity and must be photo ID and one which confirms their current address. Please provide one document from each list below. Photocopies are acceptable.

Note: If you are a representative applying on someone's behalf, you must also provide two forms of identification which confirm your identity and current address.

Acceptable proof of identity:

- *Current Passport *Birth Certificate
- *Unexpired photo card driving licence (full or provisional)

Acceptable proof of current address:

- *Utility bill dated within the last three months
- *Council Tax bill for current year
- *Unexpired old style paper driving licence
- *Bank statement dated within the last three months
- *Benefits Agency/State Pension correspondence (on letterhead) dated within the last three months

SECTION 6 - DECLARATION - Please select one of the following statements

[] I wish to receive a copy of my personal records

[] I confirm I give my consent for my representative to receive a copy of my personal records on my behalf

Signed:

Date:

SECTION 7 - REPRESENTATIVE'S DECLARATION

WARNING it is a criminal offence to obtain another person's information by deception

I confirm I am the appointed representative of the person whose information is to be released. I wish to receive a copy of their personal records.

Signed:

Date:



Where to send your application and appropriate identification

By Post to: Bassetlaw District Council Data Protection Officer Queen's Buildings Potter Street Worksop Notts S80 2AH

By email to: <u>dpo@bassetlaw.gov.uk</u>

If you have any queries regarding this form, please call 01909 533533