

## Subject Access Request Form

### NORTH WEST LEICESTERSHIRE DISTRICT COUNCIL CCTV SURVEILLANCE SYSTEMS Data Protection Act 1998

#### How To Apply For Access To Information Held On The CCTV system

These notes explain how you can find out what information, if any, is held about you on the CCTV system.

#### Your Rights

Subject to certain exemptions, you have a right to be told whether any personal data is held about you. You also have a right to a copy of that information in a permanent form except where the supply of such a copy is not possible or would involve disproportionate effort, or if you agree otherwise. North West Leicestershire District Council will only give that information if it is satisfied as to your identity. If release of the information will disclose information relating to another individual(s), who can be identified from that information, the Council is not obliged to comply with an access request unless –

- The other individual has consented to disclosure of information, or
- It is reasonable in all the circumstances to comply with the request without the consent of the other individual(s).

#### North West Leicestershire District Council Rights

North West Leicestershire District Council may deny access to information where the Act allows. The main exemptions in relation to information held on the CCTV system are where the information may be held for:

- Prevention and detection of crime
- Apprehension and prosecution of offenders.

And giving you the information may be likely to prejudice any of these purposes.

#### Fee

A fee of £10 is payable for each access request, which must be in pounds sterling. Cheques, Postal Order, etc. should be payable to 'North West Leicestershire District Council'.

**THE APPLICATION FORM:(N.B. ALL sections of the form must be completed. Failure to do so may delay your application.)**

<b>Section 1</b>	Asks you to give information about yourself that will help the Council to confirm your identity. North West Leicestershire District Council has a duty to ensure that information it holds is secure and it must be satisfied that you are who you say you are.
<b>Section 2</b>	Asks you to provide evidence of your identity by producing TWO official documents (which between them clearly show your name, date of birth and current address) together with a recent full face photograph of you.
<b>Section 3</b>	Asks you to confirm whether you will accept just viewing the information, or if you want a copy of the information.
<b>Section 4</b>	Asks you to help us to find the information you are requesting
<b>Section 5</b>	<b>You must sign the declaration.</b>

When you have completed and checked this form, take or send it together with the required TWO identification documents, photograph and fee to:

**THE DATA PROTECTION OFFICER  
NORTH WEST LEICESTERSHIRE DISTRICT COUNCIL  
COUNCIL OFFICES,  
WHITWICK ROAD  
COALVILLE,  
LEICESTERSHIRE,  
LE67 3FJ**

**Data Protection Act 1998**  
**SUBJECT ACCESS REQUEST FORM CCTV**

(Pursuant with section 7 of the Data Protection Act 1998)

The information requested below is to help the Council (a) satisfy itself as to your identity and (b) find any data held about you.



**Please complete the form below in BLOCK CAPITALS.**

<b>SECTION.1 About yourself</b>			
Your Title (Mr, Miss, Ms, Mrs)			
Other Title (Dr, Rev etc)			
First Names			
Maiden Name / Former Name			
Sex	Male	Please Tick <input type="checkbox"/>	Female
		Please Tick <input type="checkbox"/>	
Height			
Date of Birth			
Place of Birth	Town		
	County		
Current Address			
	Post code		
Telephone Number	Home		
	Mobile		
E-mail address			

If you have lived at the above address for less than 10 years, please give your previous address (es) for the period:

Previous Address (es)		
Dates of occupancy	From:	To:
Dates of occupancy	From:	To:

Continue on a separate sheet, if necessary

## SECTION.2 Proof of Identity

To help establish your identity your application must be accompanied by **TWO** official documents that between them clearly show your name, date of birth and current address

For example: -

- ✓ A Birth/Adoption certificate
- ✓ Driving licence
- ✓ Medical card
- ✓ Passport
- ✓ Or other official document that shows your name and address.

You may provide photocopies of these documents but might be required to produce the original documents at a later stage.

A recent, full face photograph of yourself.

**Failure to provide this proof of identity may delay your application.**

## SECTION.3 Supply of Information

You have a right, subject to certain exceptions, to receive a copy of the information in a permanent form. Do you wish to:

<b>A</b>	<b>View the information and receive a permanent copy</b>	Please Tick <input type="checkbox"/>
<b>B</b>	<b>Only view the information</b>	Please Tick <input type="checkbox"/>

## SECTION.4 Help us find the information

If the information you have requested refers to a specific offence or incident, please complete this section.

Please complete a separate box in respect of different categories / incidents /involvement. Continue on a separate sheet, in the same way, if necessary.

If the information you require relates to a vehicle, property, or other type of information, please complete the relevant section.

<b>Were you:</b>	<b>Please Tick Box Below</b>
A person reporting an offence or incident	<input type="checkbox"/>
A witness to an offence	<input type="checkbox"/>
A victim of an offence	<input type="checkbox"/>
A person accused or convicted of an offence	<input type="checkbox"/>
Other – please explain	
Date and time of incident when you believe image was captured (within 1 hour) (for example 10.30am on 25th February 2002)	
Location of incident (for example outside Council Offices on Whitwick Road)	
Brief description of the clothing worn at time of incident (for example I was standing by the door, and had an orange jacket on)	
Brief description of incident	

If a vehicle was involved please give details	Registration Number..... Make..... Model..... Colour.....
Description of Property	
Other type of information	

## SECTION.5 Declaration

To be signed by the applicant

*The information that I have supplied in this application is correct and I am the person to whom it relates.*

<i>Signed by</i>		<i>Date</i>	
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<i>Print Name</i>	
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North West Leicestershire District Council will use your information for tracing the relevant CCTV footage, should it exist, and the information will be processed in a manner compatible with the Data Protection Act. Any disclosures or sharing of information will only take place where required or permitted by law. For further information relating to the use and processing of your information please visit [www.nwleicestershire.gov.uk](http://www.nwleicestershire.gov.uk)

**Warning – a person who impersonates, attempts to impersonate another, or tries to obtain CCTV footage of another may be guilty of an offence**

**Before returning this form**  
**Please check:**

- *Have you completed ALL Sections in this form?*
- *Have you enclosed TWO identification documents?*
- *Have you signed and dated the form?*
- *Have you enclosed the £10.00 (ten pound) fee?*

## Further Information:

These notes are only a guide. The law is set out in the Data Protection Act, 1998, obtainable from The Stationery Office. Further information and advice may be obtained from:

**The Office of the Data Protection Commissioner,  
Wycliffe House,  
Water Lane,  
Wilmslow,  
Cheshire,  
SK9 5AF.  
Tel. (01625) 545745**

Please note that this application for access to information must be made direct to **NORTH WEST LEICESTERSHIRE DISTRICT COUNCIL** (address on Page 1) and **NOT** to the Data Protection Commissioner.

**OFFICE USE ONLY**

**Please complete ALL of this Section (refer to 'CHECK' box above).**

Application checked and legible?	<input type="checkbox"/>	Date Application Received	
Identification documents checked?	<input type="checkbox"/>	Fee Paid	
Details of 2 Documents (see page 3)	Method of Payment		
	Receipt No.		
	Documents Returned?		

**Member of Staff completing this Section:**

Name		Location	
Signature		Date	

**For completion by CCTV Manager only**

Request (Please tick)	<b>Granted</b>	<input type="checkbox"/>	<b>Denied</b>	<input type="checkbox"/>
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**If Granted, please complete the following section:**

Tape Serial Number	
VCR Counter Number	
Camera Number	
Operators Details	
Video Print Log Reference Number	
Original Tape Serial Number	
Copy Tape Serial Number	
Date of Issue	

Subject Access Signature or Proof of delivery address

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CCTV Managers Name		CCTV Managers Signature	
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Comments