

Data Protection Act 1998 SUBJECT ACCESS REQUEST FORM

Under the terms of the Data Protection Act 1998, a person is entitled to ask the Council for a copy of all the **personal information** that it holds about him/her for the purposes of providing services and carrying out its statutory duties and other functions. This includes data held on computers, paper files and closed circuit television systems (CCTV).

This form has been designed to assist us in locating your personal information and the more details you can give us concerning the personal information that you are interested in receiving, the quicker we can trace it and provide you with that information. **There is a different form for CCTV requests.**

The Council is entitled to charge you a fee for providing the information and this fee must be paid before we send you any information. **The fee is currently £10.**



Please complete the form below in BLOCK CAPITALS.

required to speedily resolve the matter.

Section 1. Details of the person about whom the information is required (the data subject)					
Please give your full name and present home address (if you are acting as agent for the person who requires their personal information please give their full name and present address details).					
Full name:					
Present address:					
Telephone number					
E-mail address					
Post code:					
Since (date):					
If you believe that we also hold information about you under a different name for example you have changed your name following marriage please give the details below.					
Previous name(s):					
Date(s) name changed:					
You do not have to give a day-time telephone number, but if we do need any further details to locate your personal information, a quick telephone call could be all that is					

	e also hold information about you in respect of one or more other ive the address details and periods concerned (please continue on a ary).
Previous address:	
Post code: Telephone number From: To:	
Previous address:	
Post code: Telephone number From: To:	
Section 2 Are	you the Data Subject? (Please tick the option which applies)
YES I am the are a bir utility bil	ne Data Subject and I enclose a form of identification. (Acceptable forms of the certificate, driving licence, recent correspondence from the Council or recent less (photocopies are acceptable for most enquiries. Originals will be returned as possible.) Please proceed to section 4.
NO authori	ot the Data Subject but I am acting on their behalf with written ity to do so. (Please enclose the original of the authority and a form of ation for yourself and the Data Subject) Proceed to section 3.
Castian 2	
Full name:	nt's details (if acting on behalf of the data subject)
Address:	
Post code:	
Telephone number	
E-mail address	
	se describe your relationship with the Data Subject which leads to make this request for information on their behalf.

	Please tick the box next to hold personal information			
	s personal data in carrying used are shown separately		-	s and functions. The
about you and to	ox next to the service(s) for which you want access.	r whicl	n you think we hold	d personal information
Council Service	es			
Building Reg	julations/Control		Grants (Private H	lousing)
Business (Non-Domestic) Rates			Homelessness	
Commercial Rents/Tenancies			Housing Applicati	ions (Council Houses)
Council House Rents/Tenancies			Housing Benefit	
Council House Repairs			Legal Services (Litigation etc)	
Council House Sales (Right to Buy)			Leisure Services	
Council Tax	Council Tax		Licences	
Council Tax	Council Tax Benefit		Planning	
Employment with the Council			Sheltered Housing	
Environment	Environmental Health		Sundry Debts	
Help us trace th				
allocated for our	of any reference numbers administrative purposes, p Please continue on a separate s	lease	provide them belov	
Reference	Service/Function	SHOOL II	necessary.	Date(s) If Known
mentioned above numbers etc. that other details that	at we hold personal informate, please indicate the purpoint have been quoted on any you think may help us to loate sheet if necessary)	se(s) bills o	in the box below, gor correspondence	giving any reference sent by us and any
Purpose or service for which your personal information is held			Reference No. etc	

Section 5. Declaration					
Declaration (to be completed by all applicants) Please note that any attempt to mislead may result in prosecution. I certify that the information given on this form is true. I understand that it is necessary for North West Leicestershire District Council to confirm my identity and that of the Data Subject (where different) and it may be necessary to obtain more detailed information in order to comply with this application.					
Signature Signature Date					
 <u>Note:</u> We must respond to your request within 40 days. That period will not begin until we have received your fee and we are satisfied about your identity and that of the data subject (where different). If the information contains details of another person we may need to seek their consent before we can provide that information to you. Please send this completed form to: The Information Management Officer North West Leicestershire District Council 					
Council Offices, Whitwick Road Coalville, Leicestershire, LE67 3FJ					
Documents which must accompany this application are:-					
 a) evidence of your identity; b) evidence of the data subject's identity (if different from above); c) original written authority that you are acting on behalf of the data subject (if applicable); d) the fee of £10 (cheques to be made payable to North West Leicestershire District Council, please do not send cash through the post) 					
If you prefer, you can show the evidence of identity to a member of the Council's staff, who will copy it and give it back to you.					
I would like the reply to this request to be:					
Sent to the address of the data subject					
Sent to the address of the agent					

If there is anything about this form which is unclear, or if you would like advice about your application or assistance with completion, please contact the Information Management Officer, at the above address, telephone (01530) 454721 or email foi@nwleicestershire.gov.uk

Thank you.

Sent to the address of the data subject and the agent

CHECKLIST Please ensure you have completed all appropriately appropriate	form?]]
,	f your identity bearing your name i.e. passport, driving ertificated copy) or at least 2 official letters such as	
Please state below what eviden	ce you have enclosed:	
Birth Certificate Passport Driving Licence 2 Official Letters Other (please state)	[[[
NOTES:		
Data Subject: The person that	the information is about.	
security of the information we h	ason we ask for proof of identification is to maintain the old about you. This will help to ensure that we do not on to anybody else. Any documents you send to us will b	e
whilst you were living at an add	ormation you are requesting may have been collected ress other than your current one, it may be useful to rder that we can access the information more quickly.	
with many different departments	West Leicestershire District Council is a large organisation of the diverse range of issues; completing the tyour request is delivered to the correct area of the more quickly and efficiently.	n
	strict Council will not release information without is the right to request further proof of authority or	
OFFICE USE ONLY		
Application number		
Date application received		
Date identity confirmed		
Type of identity		
Date authorisation confirmed		
Date fee received		
Date searches started		
Date searches returned		
Receipt number for cheque		