General Data Protection Regulation (GDPR) Subject Access Request Form

North Lincolnshire Council

Section 1 – The Request for Information

Question 1 – I would like to request information held about:

| Name | |
|--|---|
| Mr/Mrs/Ms/Miss: | Date of birth: |
| Address: | Telephone number(s): |
| Postcode: | Email: |
| Are you the person named in question 1? If yes go Question 2 – If you are requesting information about | |
| details and answer the following questions: | |
| Name | |
| Mr/Mrs/Ms/Miss: | |
| Address: | Telephone number(s): |
| Postcode: | Email: |
| What is your relationship to the person named in q | uestion 1? |
| Is the person named in question 1 deceased? | If the person named in question 1 is deceased please provide date of death: |
| Question 3 – A little bit about the person whose info | ormation is being requested |
| | son whose information is being requested the easier er we can complete your request. Please tell us as ion 1: |
| Any previous names you may be known by e.g. Maiden Name, Nicknames or Alias's: | |
| The names of anyone you think might be related to your request, such as the names of your children or grandchildren: | |

| How long have you been a resident of North Lincolnshire? If exact time not known please give an estimate: | |
|---|--|
| Please tell us anything else you think could help us to identify your information, for example any teams you have been known to and any previous addresses: | |

Question 4 - A description of the information being applied for

In order to assist us in processing your application as quickly as possible, please list below the information you are interested in obtaining. If possible, please record the names of the departments you have had involvement with and any certain dates. The more specific your request, the faster we will be able to respond.

| | Description of the information you are requesting and the date period you are interested in: | | | | |
|---|--|--|--|--|--|
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Section 2 – Proof of Identity

If you are requesting your **own** information, please complete part 1 and f you are requesting **someone else's** information, please complete part 2.

Please note we must see or original documents and cannot accept copies

| Part 1 - Identification | | | | |
|--|---------------------------|--|--|--|
| We require two forms of identification. Please submit one item from group 1 and one item from group 2 and tick to indicate the forms of identification you have submitted. | | | | |
| Group 1 | | | | |
| Full valid UK Driving Licence | Adoption Certificate | | | |
| Current and Valid Passport | HM Forces ID Card | | | |
| UK Birth Certificate, Certificate of Registry of Birth | EU National Identity Card | | | |
| If your name is now different from that shown on the document you are submitting you must | | | | |
| supply documentary evidence to confirm the | change of name | | | |
| Marriage Certificate | Deed Poll | | | |
| Decree Nisi papers | Decree Absolute | | | |
| Statutory Declaration | Other (please detail) | | | |

| Group 2 | | | | |
|---|-------------------------------|--|--|--|
| Any item from this section must be in your name, at the address given in Section 1 (Question1) and must be dated within the last three months | | | | |
| Utility (gas, electricity, water, telephone) | Vehicle Registration Document | | | |
| Council Tax demand for the current year | TV Licence | | | |
| Bank, Building Society or Credit Card Statement | Mortgage Statement | | | |
| Letter from Solicitor / Social Worker or Probation Officer | Letter from GP | | | |

| Part 2 – Requests on behalf of others | | |
|---|--------|----|
| If you are requesting information on behalf of someone else we need to make sure you authorised to receive this information and to act on their behalf. Please select one options below: | | е |
| I am the legal guardian of a child not considered mature enough to understand their rights and therefore make their own request If yes , please complete and submit the from in Section 3 and or provide a copy of one of the following four items: | Yes | No |
| (a) Child's Birth Certificate | Yes | No |
| (b) Court Orders | Yes | No |
| (c) Custody Arrangement Documents | Yes | No |
| (d) Parental Responsibility Document | Yes | No |
| I have the written consent of the person in Section 1 (Question 1). If yes , please complete and submit the form in Section 3. | Yes | No |
| I am legally authorised to act on behalf of the person in Section 1 (Question1). If yes , please complete and submit the from in Section 3 and or provide a copy of one of the following four items: | Yes | No |
| (a) Court of Protection | Yes | No |
| (b) Court Appointed Deputy | Yes | No |
| (c) Lasting Power of Attorney (Finance and Property) | Yes | No |
| (d) Lasting Power of Attorney (Personal Welfare) | Yes | No |
| If you did not select ' yes ' for any of the above options but still feel you are entitled to access information, please write a short explanation of why below: | ss the | |

North Lincolnshire Council reserves the right to seek further evidence if there is any doubt as to the identity of the data subject or the person requesting information on their behalf

Section 3 – Consent Form

| To be completed by the per else: | son listed in Section 1 (Question 1) if the applica | ation is made by someone |
|---|---|-----------------------------|
| Ι | do hereby authorise | to |
| request and access by pers Section 1 (Question 4). | onal information held by North Lincolnshire Cou | ncil and as requested in |
| Signature | Date | |
| | Section 4 – Declaration | |
| information as described in | eral Data Protection Regulation (GDPR) I request Section 1 (Question 4). I confirm this is the only d that the information given on this form is true a | personal information that I |
| Signed | | |
| Print Name | | |
| Date | | |
| | | |

Please check you have:

- (a) Completed all relevant parts of the form.
- (b) Provided Proof of Identity (Section 3)
- (c) Signed the applicants declaration above (Section 4)

Please send this form and all documentation to: (We advise that you use a secure method of postage)

Information Governance Team North Lincolnshire Council Church Square House 31-41 High Street Scunthorpe DN15 6NL

Alternatively please hand your completed form and related documentation to any Local Link Office.