THE APPLICANT - the person who is completing the form



## **INTRODUCTION**

Name

**Address including** 

Individuals (also referred to as Data Subjects) have a right to obtain a copy of personal information held about them.

The Council is obliged to fulfil your request within 30 days from receipt of the request and satisfactory proof of identity. The 30 days may be extended if the request is complex but the Council will inform you if this applies.

To enable the Council to deal promptly with this request and satisfy legal requirements please complete this form as accurately as possible.

You can post the completed form with identification to: **Data Protection, Information Governance Team, PO Box 4, Blackpool, FY1 1NA,** or you can take it to our **Customer First Centre, Corporation Street, Blackpool** or you can email it to **DPA@blackpool.gov.uk**.

postcode											
Email addres	SS										
Is the request for your own someone else? (please tick)			n information or			О	wn		Someo	ne else	
If someone e	else, wh	at is yo	our relation	onship to	them?						
Which address entered on for correspondence? (please						Appl	Applicant's		Data Subject's		
		<b>-</b>									
FULL DETAIL	S OF DA	TA SU	BJECT - ti	ne perso	n who t	he pers	onal in	formatio		ut	
Title (please tick)	Mr		Mrs		Miss		Ms		Other (please state)		
Surname / Fa	amily Na	ame									
First name(s	)										
Former / Ma	iden Na	mes									
Date of Birth											
Gender (CCTV requests only)		only)	Male			Fema		le			
Height (CCTV requests only)											
The Data Sul current addr postcode	-										
Home telephone Number							bile mber				
Email address											





#### **INFORMATION SEARCH AREAS**

To assist the Council in searching for your personal information, please provide a description of any information you specifically require. You can also help us to identify your information by providing any reference/account numbers that you have. Continue on a separate sheet if necessary.

Reference	Description of information or Council Services
e.g. Council Tax	e.g. Case history, payment records, Council Tax or Housing Benefit
Reference Number	

## **CCTV REQUESTS ONLY – ADDITIONAL INFORMATION**

The following information is only required if you are requesting information from the Blackpool CCTV system. If your request refers to a specific incident, please provide as much information as possible to help us in our search. Please continue on a separate sheet if necessary.

Were you the person reporting an offence or	Yes/No	
Were you the victim of an offence?		Yes/No
Were you a person accused or convicted of a	n offence?	Yes/No
Does the incident relate to a vehicle or damage in a car park?		Yes/No
Date and time of incident (please give a maximum two-hour period – if a longer period is required please contact us)  Place where incident happened		
Brief description of incident		

# HOW WE SUPPLY THE INFORMATION TO YOU

The information will be supplied to you in a permanent format. This will generally be on paper, or a on a CD/DVD for CCTV images.

Please indicate if you require the information electronically and confirm the email address to send this to. You should be aware that if the electronic file is too large to email to you, we will contact you to discuss this. The Council is unable to take responsibility for the security of the information when you receive it at that email address.

We are unable to provide emailed or USB/Data Stick copies of CCTV images at this time.

Electronic format required?	Yes/No
Email address	





## **DECLARATIONS**

**Warning:** A person who impersonates or attempts to impersonate another may be guilty of an offence. It is illegal to coerce a person to obtain personal data (e.g. for a job reference) for other than that person's private use.

#### **DATA SUBJECT'S DECLARATION**

The information that I have supplied in this application is correct and I am the person named in the Data Subject section.

Signed	Date

## **GUARDIAN OR AGENT DECLARATION** (if applicable)

The information that is supplied in this application is correct and I am authorised to act on behalf of the Data Subject.

Signed	Date

**Note:** If you are a solicitor or agent appointed by the Data Subject, please attach a signed copy of the authority to act on the Data Subject's behalf.

## **PROOF OF IDENTITY**

You must provide two copies (not originals) of official documents that contain your current name and address and a unique identifier (e.g. ref number or date of birth). Examples are household bills, driver's licence, passport or a medical card. For CCTV requests, you must also provide a recent full face photograph.

The Council may need to ask for further information to satisfy the identification requirements. Please remember that your request could be delayed if you do not supply identification with the application.

We may ask for proof of your relationship with the Data Subject if the application is not for your own personal data.

## **GENERAL INFORMATION**

In accordance with the current data protection legislation, the information on this form will only be used to enable the Council to meet your subject access request. This form will be kept in a secure place for a period of twelve months then destroyed in accordance with the Council's Retention Schedule and Disposal Policy, unless we are required to keep it longer for a lawful reason, appeal or complaint.

OFFICIAL USE ONLY		
Date received	Post / Email / in person?	
Type of Identification documents provided and checked (must be a minimum of two documents that include name and address, and a unique factor such as a date of birth or NI Number)		

