

Nythe, Eldene & Liden Parish Council

Subject Access Request Form

Information

We must respond to your request within 40 calendar days. However this period does not start until:

- a) We are satisfied about your identity
- b) You have provided enough detail to locate the information you are seeking

Please complete the following sections of this form providing as much information as possible to help us deal with your request.

1. Provide details of the person about whom the council is holding data (the Data Subject)

Full Name (Print) _____

Date of Birth _____

Present Address:

Previous Address (if less than 3 years at your present address):

Post Code:

Post Code:

Telephone Number _____

Email address _____

2. Are you requesting information about yourself (person referred to in question 1)?
If **YES**, then go to question 3. If **NO** please complete the following:

Full Name (Print) _____

Present Address:

Post Code:

Telephone Number: _____

Email address: _____

Relationship with data subject and brief explanation as to why you are requesting this information rather than the data subject:

If you are acting on behalf of the data subject you will need to enclose their written authority including a signature or other legal documentation (e.g. power of attorney) to confirm this request. You also need to enclose evidence of your identity and that of the data subject (see section 4 for details of acceptable identity)

3. Please provide a clear description of the information that you are requesting, including details of which council service areas (if known) it might be held by, dates i.e. the period(s) for which you are requesting the information, any reference numbers given to you like payroll, account numbers or client numbers and any additional information which will enable us to locate it.

4. Please provide **two** pieces of evidence of your identity (one containing a photo). Acceptable types of documents used to verify your identity are detailed below.

Driving Licence	Passport	National ID Card	Medical Card	Utility Bill
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You may wish to send your documents special/recorded delivery. Your proof of identity will be returned to you securely after verification.

5. All information in respect to your request will be sent to you via secure email unless alternative arrangements are made. We may require further evidence of your identity if you collect your information from council premises.

Declaration

To be completed by all applicants. Please note that any attempt to mislead the Council may lead to prosecution.

I (insert name) _____

certify that the information given on this application form and any attachments therein to Nythe, Eldene & Liden Parish Council is accurate and true.

I understand that it is necessary for the Council to confirm my identity and it may be necessary to obtain more information in order to locate the correct information.

Signature

Date

Return of the Form

If you are either posting your documents and payment or hand delivering them then our address is detailed below:

Nythe, Eldene & Nythe Parish Council
Liden Library
Barrington Close
Liden
Swindon SN3 6HF

Our email address is clerk@nytheeldeneliden-pc.gov.uk

How we will send you the information you have requested

We want you to receive the information you have requested in the most convenient way for you.

However we do have an obligation under the Data Protection Act 1998 to provide you with the information you have requested in the most secure way possible.

We believe the most secure way to provide you with the information is either:

- For you to collect the documentation in person from our offices (this can be in paper form)
- For us to email you the information securely/encrypted which would allow you to electronically access the information requested (free of charge)

We can post your information to you but there are risks attached to providing you with your information using this method, e.g. Royal Mail may lose your information, deliver it to the wrong address, etc.

Please confirm you are happy to receive your information by email by ticking the box below and confirming the email address that your information should be sent to:

Tick Box	<input type="checkbox"/>	EMAIL ADDRESS	
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Alternatively if you prefer any of the other methods below please indicate which by ticking ONE of the boxes below:

Collection in person	<input type="checkbox"/>	Paper Copy or on CD <i>(please circle your choice)</i>
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By Post (special delivery)	<input type="checkbox"/>	Paper Copy or on CD <i>(please circle your choice)</i>
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