Subject Access Request Form

The data protection laws provides you ('the Data Subject') with the right to receive a copy of the personal data we hold about you.

This form can be used to confirm your identity and to assist us in locating your personal data. It can also be used to confirm the identity and authority of someone making the request on behalf of the Data Subject. Further guidance on acceptable identification documents is available on our website.

Your request will be processed within one month of receipt by us of such information we may reasonably require to satisfy ourselves as to your identity and to locate the information sought. Where we cannot process your request within one month we will let you know and will process your request no later than 3 months from receipt of your request.

Please complete the foll	owing:			
Data Subject Information	on			
Title:				
Forename(s):				
Surname / Family Nam	e:			
Previous name(s):				
Reason for belief we ment hold data (e.g. organisal scheme/employer)				
Contact Phone Number	er:			
Email address:				
Postal address:				
If we have a query abou	t your request, hov	v would you pre	efer that we contact yo	u? (please tick)
By phone	By email		By post	

Are you the Data Subject?

Yes If you are the Data Subject please supply two documents which prove your identity and address. (see website for acceptable items)

No Are you acting on behalf of the Data Subject with their express permission, or with the appropriate legal authority? If so, this must be evidenced in writing and enclosed with this form. Please also enclose two documents which prove the Data Subject's identity and address.

Please specify the personal information you are requesting together with any other relevant information which may help us identify the information you require: If you are making the request on behalf of the Data Subject, please explain your relationship and the reason why you are making the request on their behalf: Declaration and signature By signing this form I certify that the details given on this form are true and correct. I understand that it is a criminal offence to obtain or disclose personal data unlawfully or to attempt to do so. I consent to you holding copies of my identity, which I will provide to you or have already provided to you, for the purposes of processing this subject access request. Signature: Date: Please send your completed request form, proof of identity and authority to act on behalf of the Data Subject (if applicable) to: Privacy Contact Officer ClashStreetCo LLP

Third Floor, Bank House, 27 King Street, Leeds LS1 2HL

Information being requested