

SUBJECT ACCESS REQUEST

You should complete this form if you want us to supply you with a copy of any personal data we hold about you. You are currently entitled to receive this information under Article 15 of the UK GDPR (General Data Protection Regulations). We can provide information about any processing of your personal data that is being carried out, the retention periods which apply to your personal data, and any rights to rectification, erasure, or restriction of processing that may exist.

We will acknowledge:

- receipt of your written request; and
- receipt of any further information we may ask you to provide to enable us to comply with your request.

We will endeavour to respond promptly to your request and in any event within one calendar month.*

This information you supply in this form will only be used for the purposes of identifying the personal data you are requesting and responding to your request. You are not obliged to complete this form to make a request, but doing so will make it easier for us to process your request quickly.

SECTION 1 Details of person requesting the information

Full Name	
Current Address	
Telephone Number	
Email address	
Date of birth	

SECTION 2 Are you the Data Subject (person whose information you request from us)?

- Yes, I am the data subject. I enclose proof of my identity
(See below and go to SECTION 4)
- No, I am acting on behalf of the data subject. I have enclosed the data subject's written authority and proof of the data subject's identity and my own identity (see below and complete SECTION 3)

To ensure we are releasing data to the right person we require that you provide us with proof of your identity and address. Please supply us with a photocopy or scanned image (do not send originals) of one or both of the following:

1. ID: ie Passport, Driving Licence, Birth Certificate, National Insurance Card.
2. Proof of address: ie Utility Bill, Bank Statement, Local authority tax bill.

SECTION 3 Details of the data subject (if different from Section 1)

Full Name	
Current Address	
Telephone Number	
Email Address	
Date of Birth	

SECTION 4 – Please provide details of the information you are requesting.

Please note that if the information you request reveals details directly or indirectly about another person we have to seek the consent of that person before we can let you see that information.

In certain circumstances, where disclosure would adversely affect the rights and freedoms of others, we may not be able to disclose the information to you, in which case you will be informed promptly and given full reasons for the decision.

While in most cases we will be happy to provide copies of information and most information you request will be provided by us free of charge, in accordance with article 12 of the GDPR, we reserve the right to charge a fee or refuse the request if it is considered to be 'manifestly unfounded or excessive'. However we will make every effort to provide you with a satisfactory form of access or summary of information if suitable.

* Please note that if you have made a number of requests or your request is complex, we may need extra time to consider your request, and this can take up to an extra two months to respond. Where this is the case, we will let you know within one month that we need more time and explain why.

DECLARATION

I confirm that I have read and understood the terms of this subject access request form and certify that the information in this application is true. I understand that it is necessary for Habinteg to confirm my/the data subject's identity and it may be necessary to obtain more detailed information in order to locate the correct personal data

Signature: _____ Date: _____

Documents which must accompany this application

- Evidence of your identity
- Evidence of the data subject's identity (if different from above)

Authorisation from the data subject to act on their behalf (If applicable)

Please send completed form and accompanying documentation to:

Woven

Laganwood House, Newforge Lane, Belfast BT9 5NW

To be completed by staff member:

Authorised YES NO Signed _____

Job Title _____ Date _____

Notes