



REQUEST FOR PERSONAL INFORMATION – SUBJECT ACCESS REQUEST (SAR)

Return Address:
Data Protection and Feedback Team
East Riding of Yorkshire Council
County Hall
Beverley
HU17 9BA

Contact details:
Email: data.protection@eastriding.gcsx.gov.uk
Telephone: 01482 391419

SECTION I – YOUR DETAILS

Please provide the following details about yourself:

Full Name.....

Any Previous Names.....

Date of Birth.....

Address.....

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Postcode.....

Contact Number.....

Email.....

The details provided above will be used to communicate with you about your request. The Councils default communication method is email. Please indicate your preferred method for receiving your completed request:

Post Email

The following are required as part of a valid request

A request in writing, if you are requesting information about yourself you will need to complete **section 3**. If you are requesting information about someone else you will need to complete **sections 2 and 3**.

Two proofs of identity, you and the person you are requesting information about- for example a passport, driving licence. If you are requesting your child’s information you will need to supply evidence of parental responsibility e.g. your child’s birth certificate. Originals are not required, any copies must be of good quality, and customer service centres can take authenticated copies to assist in making any request.

SECTION 2 – OTHER PERSONS DETAILS

If different from section 1 please provide details of person you are requesting on behalf of:

Full Name.....

Any Previous Names.....

Date of Birth.....

Address.....

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Postcode.....

Please explain briefly why you are requesting the information on their behalf:

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I give consent for the person named in **Section 1** to request and receive my personal information as outlined on this form. I understand that the information and identification supplied will be used to locate the information requested and confirm my identity.

Consent from children under the age of 12 is not normally required - you must however have evidence of parental responsibility.

Signed.....Date.....

Print Name.....

* Please use additional page provided if you are requesting information on behalf of more than one person

SECTION 4 - DECLARATION

I have included the following with this form:

- Two proofs of identity for the applicant in Section 1

- If applicable, two proofs of identity for anyone listed in section 2, or proof of parental responsibility if a child under the age of 12

I confirm that the information given on this form is correct. I understand that the East Riding of Yorkshire Council has a legal obligation to use this information to locate and provide access to my personal information. This information will not be shared with any other organisation without your permission. It will be held in the UK and retained in line with the East Riding of Yorkshire Council's published retention schedule. For more information and or for details of what to do if you are unhappy about how we deal with your request, please visit www.eastriding.gov.uk/privacynotice

Signed.....Date.....

Print Name.....

*** SECTION 2 – OTHER PERSONS DETAILS (ADDITIONAL PAGE)**

If different from section 1 please provide details of person you are requesting on behalf of:

Full Name.....

Any Previous Names.....

Date of Birth.....

Address.....

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Postcode.....

Please explain briefly why you are requesting the information on their behalf:

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Consent from children under the age of 12 is not normally required - you must however have evidence of parental responsibility.

Signed.....Date.....

Print Name.....