**BABERGH & MID SUFFOLK DISTRICT COUNCILS**

**DATA SUBJECT ACCESS REQUEST FORM** (**DSAR FORM)**

The General Data Protection Regulations allow Data Subjects to make requests regarding information held about them (subject to certain exemptions).

Babergh District Council and Mid Suffolk District Council cannot usually disclose information about someone else without their permission, even if it is a member of that person’s own family who requests it.

It is an offence to pretend to be someone else and apply for information about them.

It is possible for an agent to make an application on someone else’s behalf, but the agent must be given formal written authority by the person whose personal information is being requested (Data Subject) and this authority must be forwarded to Babergh District Council and Mid Suffolk District Council together with this DSAR application.

This written authority along with the DSAR form, ID and proof of address documents can be handed in at the Babergh and Mid Suffolk District Councils Customer Access Points or sent by post or e mail.

* **If by post** send: For the attention of the Information Governance Officer (DSAR) Babergh and Mid Suffolk District Councils, Endeavour House, 8 Russell Road, Ipswich IP1 2BX
* **For delivery by hand** please mark “For the attention of the Information Governance Officer (DSAR)” and take to Babergh and Mid Suffolk District Councils at [54 Ipswich Street, Stowmarket IP14 1AD](https://www.google.co.uk/maps/place/54+Ipswich+St,+Stowmarket+IP14+1AD/@52.1865973,0.9951853,17z/data=!3m1!4b1!4m5!3m4!1s0x47d9a535310a0ef5:0xf2005dfc6835d01a!8m2!3d52.186594!4d0.997374?hl=en) or at [Town Hall, Old Market Place, Sudbury CO10 1TL](https://www.google.co.uk/maps/place/Town+Hall,+Old+Market+Place,+Sudbury+CO10+1TL/@52.0389739,0.7296875,17z/data=!3m1!4b1!4m5!3m4!1s0x47d85572e1289409:0x25f5b12d25f03ee5!8m2!3d52.0389516!4d0.7319411?hl=en)

**Or by Email:** [Customer.Services@baberghmidsuffolk.gov.uk](mailto:Customer.Services@baberghmidsuffolk.gov.uk)

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| **DATA SUBJECT ACCESS REQUEST FORM**  **General Data Protection Regulations** |

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| **Part 1 – Person to whom the information relates (the data subject)** | | | |
| Title | Mr **□**  Mrs **□**  Miss **□**  Ms **□**  Other: | | |
| Surname |  | Forename(s) |  |
| Maiden Name /Former Names |  | | |
| Date of Birth |  | Sex | Male Female |
| Current Address |  | | |
| Postcode |  | Telephone No |  |
| **I enclose a copy of one of the following as proof of the identity of the data subject:**  **□ Birth Certificate □ Driving Licence □ Passport**  **I also enclose a copy of a letter, bill or statement dated within the last 3 months as proof of address from my:**  **Electricity supplier, Gas supplier, Telephone supplier, Bank or Building Society**  If none of these is available please contact the Information Governance Officer at Babergh And Mid Suffolk District Council for advice on other acceptable forms of identification. | | | |
| **Part 3 – Is the requested information about you (are you the data subject)?** | | | |
| **No, the information is not about me** *(go to part 4)*  **Yes, the information is about me** *(go to part 5)*  **Please Note:** If information to be disclosed includes incidental disclosure of 3rd party (e.g. family member, referee, care worker etc) it cannot be disclosed without the consent of that party. | | | |
| **Part 4 – Person (agent) acting on behalf of the data subject.** | | | |
| Title | Mr **□**  Mrs **□**  Miss **□**  Ms **□**  Other: | | |
| Surname |  | Forenames |  |
| Address |  | | |
| Postcode |  | Telephone No. |  |
| **What is your relationship to the data subject** *(e.g. parent, carer, legal representative)* | | | |
| **Do you have legal authority to request the data subject’s personal information?**  Yes **□**  No **□** | | | |
| **If the data subject is under 13, do you have parental responsibility for them?**  Yes **□**  No **□** | | | |
| **Please provide proof that you are legally authorised to act on the data subject’s behalf in the form of:**  **□** Letter of Authority **□** Lasting Power of Attorney **□** Evidence of parental responsibility  **□** Other (*give details)* | | | |
| **Please provide proof that you are the person authorised to act on behalf of the data subject by enclosing a copy of one of the following:**  **□ Birth Certificate □ Driving Licence □ Passport**  If none of these is available please contact the Information Governance Officer for advice on other acceptable forms of identification. | | | |
| **Part 5 – What is the nature of the request you are making?** | | | |
| Please help us deal with your request quickly and efficiently by giving as much detail as possible about the information you want. If possible restrict your request to a particular council service or department, period of time or incident *(e.g. benefits, council tax, environmental health, housing, planning etc, names of previous contacts, any file reference if known, etc).*  If necessary continue this section on a separate page. | | | |
| **Information requested covers (dates)** | From: | | To: |
| **Please state the council you are applying to** | Babergh DC **□**  Mid Suffolk DC **□** | | |
| **Information Source:** | | | |
| **Council Tax** | Click here to enter text. | | |
| **Benefits (Housing or Council Tax)** | Click here to enter text. | | |
| **Housing (Tenants)** | Click here to enter text. | | |
| **Housing Options and Advice** | Click here to enter text. | | |
| **Planning and Building Control** | Click here to enter text. | | |
| **Environmental Services** | Click here to enter text. | | |
| **Other** *(please explain)* | Click here to enter text. | | |
| **Any other information relevant to your request** *(i.e, officers contacted etc.)* | Click here to enter text. | | |
| **Part 6 – Access to the information** | | | |
| *We must respond to you within one month – if we feel the request is complex we may ask for an extension of this period.* | | | |
| **Do you wish to:** | **□** View the information **□** Be provided with a copy  Via E-Mail By Letter | | |
| **Your E mail Address:** | Click here to enter text. | | |
| **Copies** *(if requested)* **to be:** | **□** Sent to the data subject **□** Sent to you **□** Collected | | |
| **Do you have any special needs when viewing the information or in what format it is provided?** | Click here to enter text. | | |
| **Part 7 – Declaration** | | | |
| I certify that the information on this form is true. I understand that the Council is obliged to confirm proof of identity/authority and that it may be necessary to obtain further information in order to comply with this data subject access request. | | | |
| Name | Click here to enter text. | | |
| Signature |  | Date |  |
| **Warning – a person who unlawfully obtains or attempts to obtain personal information is guilty of a criminal offence and is liable to prosecution.** | | | |
| **Part 8 – Before submitting this form please check that you have:** | | | |
| **□ Enclosed proof of the identity of the person the information is about (the data subject) *(****see Part 1)*  **□ Enclosed proof of authority to act on behalf of the data subject – if required** *(see Part 4)*  **□ Given enough details to enable us to locate the information you require**  *(see Part 5)*  **□ Signed, read and dated the declaration** *(see Part 7)*  **□ Completed all sections of this form** *(Part 4 is only to be completed by a person acting on behalf of the data subject)* | | | |
| **Please submit this form and accompanying documents by hand, post or email to:** | | | |
| * If by post send: For the attention of the Information Governance Officer (DSAR) Babergh and Mid Suffolk District Councils, Endeavour House, 8 Russell Road, Ipswich IP1 2BX * For delivery by hand please mark “For the attention of the Information Governance Officer (DSAR)” and take to Babergh and Mid Suffolk District Councils at [54 Ipswich Street, Stowmarket IP14 1AD](https://www.google.co.uk/maps/place/54+Ipswich+St,+Stowmarket+IP14+1AD/@52.1865973,0.9951853,17z/data=!3m1!4b1!4m5!3m4!1s0x47d9a535310a0ef5:0xf2005dfc6835d01a!8m2!3d52.186594!4d0.997374?hl=en) or at [Town Hall, Old Market Place, Sudbury CO10 1TL](https://www.google.co.uk/maps/place/Town+Hall,+Old+Market+Place,+Sudbury+CO10+1TL/@52.0389739,0.7296875,17z/data=!3m1!4b1!4m5!3m4!1s0x47d85572e1289409:0x25f5b12d25f03ee5!8m2!3d52.0389516!4d0.7319411?hl=en)   Or by Email: [Customer.Services@baberghmidsuffolk.gov.uk](mailto:Customer.Services@baberghmidsuffolk.gov.uk) | | | |