

Individual Rights Request Form

SECTION 1: YOUR DETAILS

| Title |
|--|
| |
| First Name |
| |
| Surname |
| |
| Date of Birth |
| House Name/Number |
| |
| Address 1 |
| |
| Address 2 |
| |
| Town |
| |
| Post Code |
| |
| Email Address |
| |
| Telephone Number |
| |
| SECTION 2: YOUR REQUEST |
| Please select what Individual Right in line with Data Protection Law you would like to exercise; |
| Subject Access: Confirmation and Access to the personal data we hold about you. |
| Rectification: To alter the personal data we hold about you, if you believe it to be inaccurate |
| Erasure: To delete the personal data we hold about you, if you believe it to be unecessary. |



SECTION 3: REQUEST DETAILS

| p us locate the information we hold, please tick the box of the department(s) within the I which your request relates to; |
|---|
| Adult Social Services |
| Bereavement Services & Registrations |
| Children's Social Services |
| Commissioning & procurement |
| Culture, Venues, Tourism & Events |
| Customer Services |
| Education & Lifelong Learning |
| Facilities Management |
| Finance |
| Governance & Legal |
| Harbour Authority, Parks & Sport |
| Health & Safety |
| Housing |
| Housing Benefits |
| Human Resources |
| ICT |
| Information Governance |
| Performance & Partnerships |
| Rent Smart Wales |
| Transport |
| Waste Services |
| Other, please specify; |
| |

Please Note: If you wish to request information from;

- A school
- The NHS
- The Police

You will need to submit a request to the appropriate body directly.



| Please indicate a time frame from which your request refers to; |
|--|
| From To |
| |
| Please provide any further details of what personal data you would like to access/rectify/erase below; |
| |
| SECTION 4: SUPPORTING DOCUMENTS |
| In order for your request to be processed, Cardiff Council requires; |
| A clear copy of valid photographic ID (i.e. Passport, Driver's License) Proof of address, dated within the last 3 months (i.e. Bank statement, utility bill) |
| I confirm that I have inserted copies of the above (please tick) |
| SECTION 5: DATA SUBJECT DECLARATION |
| Under the Data Protection Act 2018 I wish to exercise my Individual Rights, as detailed in section two. |
| I confirm that I am the subject of this information and not someone acting on my behalf, and understand that Cardiff Council have one calendar month to respond to my request. This timeframe is statutory, unless there are circumstances in which this timeframe requires extension, or where further information is required from myself. |
| We will contact you directly, if the circumstances above occur. |
| I have read and understood the terms of this Data Subject Declaration and consent for my personal details to be submitted to the Information Governance Team |
| Signed Date |



Please send your request to the address below;

Data Protection Officer
Cardiff Council
Information Governance Team
County Hall
Atlantic Wharf
Cardiff Bay

CF10 4UW

Email: Individualrights@Cardiff.gov.uk