

# Individual Rights Request Form: Third Party

## SECTION 1: DETAILS OF THE APPLICANT MAKING THE REQUEST

Full Name

Company Name/Contact Name (if applicable)

House Name/Number

Address 1

Address 2

Town

Post Code

**Telephone Number** 

Email address



## SECTION 2: DATA SUBJECT DETAILS (who the information is about)

Title
First Name
Surname
Date of Birth
House Name/Number
Address 1
Address 2
Town
Post Code
Email Address
Lelephone Number

## SECTION 2.1: DATA SUBJECT CONSENT (who the information is about)

I ..... CONFIRM I AM THE NAMED DATA SUBJECT OF SECTION 2 AND HAVE FREELY AGREED FOR THE INDIVIDUAL NAMED IN SECTION 1, TO REQUEST THE ACCESS, RECTIFICATION AND/OR ERASURE OF MY PERSONAL DATA.

SIGNED

DATE



## **SECTION 3: YOUR REQUEST**

Please select what Individual Right in line with Data Protection Law you would like to exercise;



Subject Access: Confirmation and Access to personal data we hold

Rectification: To alter the personal data we hold, if you believe it to be inaccurate

Erasure: To delete the personal data we hold, if you believe it to be unecessary.

## **SECTION 4: REQUEST DETAILS**

To help us locate the information we hold, please tick the box of the department(s) within the council 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

|--|--|--|

Please provide any further details of what personal data you would like to **access/rectify/erase** below;

### **SECTION 5: SUPPORTING DOCUMENTS**

In order for your request to be processed, Cardiff Council requires;

- A clear copy of valid photographic ID of the **data subject** (i.e. Passport, Driver's License)
- Proof of address, dated within the last 3 months for the **data subject** (i.e. Bank statement, utility bill)

I confirm that I have inserted copies of the above (please tick)



#### **SECTION 6: THIRD PARTY DECLARATION**

Under the Data Protection Act 2018 I wish to exercise the Individual Rights of the data subject, as detailed in Section Two.

I confirm the data subject is aware their personal data will be processed for the purpose indicated and that I have consent to act on behalf of the data subject in requesting this information.

I understand that Cardiff Council have one calendar month to respond to my request. This timeframe is obligatory, unless there are circumstances in which this timeframe requires extension, or where further information from myself is required.

We will contact you directly, if the circumstances above occur.



I have read and understood the terms of this Third Party 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