



SAXON WEALD

Data Subject Access Request (DSAR) Form

A Data Subject Access Request allows you to determine what information we hold about you. The information provided in this form will be used to authenticate your identity and to clarify which information you would like. You do not need to complete this form but it will make handling the request faster. We will usually respond to your request within one calendar month of receiving a valid request.

The fields denoted with * are required for us to confirm your identity.

DATA SUBJECT DETAILS:

Section I

Title	
Surname*	
Previous Surname (if relevant)*	
First name(s)*	
Reference Number (tenancy/owner account)	
Current address (if you request the information by post this is the address we will post it to)*	
Previous address (or addresses) if you have moved in the last five years	
Telephone number	
Home number	
Work number	
Mobile number	
Email address	
Date of birth*	

THE REQUEST

Section 2

<p>Details of data requested (Please be as specific as possible, providing timeframes, names/job titles of people who you believe are processing your personal data and as much information as possible to enable us to locate the personal data that you are requesting)</p>	
<p>How would you ideally like the information to be supplied to you? (This could be by post or by email. Please note that we will not disclose sensitive information to you via email).</p>	

DECLARATION

I,,
the undersigned and the person identified above, hereby request that Saxon Weald provide me with the data about me.

Signature: Date:

For office use only:

This form must immediately be forwarded to Saxon Weald's Data Privacy Officer and recorded on the DSAR register.

ICO registration number: ZA490750

DETAILS OF PERSON REQUESTING THE INFORMATION

(If not the data subject):

Section 3

Are you acting on behalf of the data subject with their written or other legal authority?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'Yes' please state your relationship with the data subject (e.g. parent, legal guardian or solicitor)	
Please enclose proof that you are legally authorised to obtain this information.	
Title	
Surname	
First name(s)	
Current address	
Telephone number	
Home number	
Work number	
Mobile number	
Email address	

DECLARATION

I,, the undersigned and the person identified above, hereby request that Saxon Weald provide me with the data about the data subject identified in section 1.

Signature: Date:

For office use only:

This form must immediately be forwarded to Saxon Weald's Data Privacy Officer and recorded on the DSAR register.

ICO registration number: ZA490750