# General Data Protection Regulation (GDPR) and Data Protection (DPA) Act 2018 **Rights of Access, Rectification and Erasure Reguest**



Some things to note before completing this form:

• Two forms of **original** identification (or certified copies) must be provided with this form and will be returned to you via First Class Signed For delivery. If you would rather not send original documentation through the post, you can either take it to our office where our staff will make a certified copy for you free of charge or alternatively, solicitors and some Post Office branches provide this service but will charge a fee.

NB: Please do not scan or photocopy documents yourself as we cannot accept these and it will delay your request

- For access to CCTV/body cam footage of yourself/someone you represent, we will require a recent facial photograph.
- For access to CCTV/body cam footage data of your vehicle/ vessel, we will require evidence of ownership.
- If your request relates to the personal data of a deceased person, you cannot use this form as the GDPR and DPA 2018 only apply to living individuals.

Section 1 – About you				
Full name:				
Have you been known by any other name?				
No Yes (if Yes, please provide be	low as this can help us locate your information)			
Other name:				
Address:				
	Postcode:			
Tel No:	in case we need to contact you before starting your request			
Email address:	Date of birth:			
Are you the Data Subject (the person who the         Yes         No         (If No, please ensure you	also complete Section 2)			
How would you like to receive your copy of th				
Secure email <b>OR</b> Hard copy sent	via Signed For delivery (please select only <u>one</u> option)			
	continued over			

Section 1 – About you (continued)					
We need you to supply two forms of proof of your identity. We can only accept original documents or certified copies. If you send us your original documents, we will return them as soon as possible via First Class Signed For delivery.					
A) Please supply one of the following original documents, or a certified copy, to confirm your identity:					
Birth certificate     Driving licence     Passport					
B) Please also supply one of the following original documents, or a certified copy, date months to confirm your address:	ed within the last 3				
Utility bill     Bank statement     Benefits agency correspondence					
<ul> <li>C) A recent facial photograph if you are requesting CCTV footage of you or someone y</li> <li>D) V5 Vehicle Registration Document if you are requesting CCTV footage of a vehicle/v</li> <li>(please note you can only request this if you or the person you represent, were in the vehicle</li> </ul>	vessel				
Section 2 – Making a request on behalf of someone else					
Data Subject's full name:					
Have they been known by any other name?					
No Yes (if Yes, please provide below)					
Other name:					
Their address:					
Their postcode:					
Their date of birth:					
In addition to the requirements stated in Section 1 regarding proof of your identity, you must evidence of A) the Data Subject's identity and B) your right to make this request on their beh processing your request.	•				
A) Please select below your relationship to the Data Subject:					
Parent Other relative Social Care/Health Professional					
Solicitor Other, please specify:					
Please supply one of the following original documents, or a certified copy, to confi	rm their identity:				
Birth certificate     Oriving licence     Passport	, i i i i i i i i i i i i i i i i i i i				
and one of the following original documents, or a certified copy, dated within the confirm their address:	last 3 months to				
Utility bill     Bank statement     Benefits agency correspondence	ce				
or if you are a practising solicitor, barrister or FCILEx, a written undertaking you have v	verified their identity.				
<b>B)</b> If the Data Subject is over the age of 13 years you must provide either written or legal their behalf. This can be either a letter signed by the person themselves or an official you have legal authority to act on their behalf, eg, a Lasting Power of Attorney (LPA).					
<b>NB:</b> Please note there are two types of LPA (Property and Financial Affairs and Healtl please ensure you provide the correct one for each data type you are requesting, eg, requesting social care records and details of housing benefit you will need to provide Health and Welfare and Property and Financial Affairs.	if you are				
• If the Data Subject is under the age of 13 years you will need to prove that you have p for them. If you are providing their full birth certificate as proof of identity for Section your name as a parent that is sufficient to also satisfy requirement 2B. If not, in addition document that awards you parental responsibility, eg, a Court Order.	2A which shows				

Section 3 – The data
A) Personal data held in files (paper and electronic form)

Please provide a description of the personal data that you either require access to, or rectification/erasure of. If you believe the information we hold is inaccurate or incomplete or you are requesting that we erase it, please tell us why and enclose documentation to evidence this where possible. If you know which service area holds your information, please let us know as this will help us to locate it more quickly.

The date range you would	like us to search:		
From:		То:	
OR			
NB: The GDPR/Data Protect	tion Act 2018 only applies to you (or the person you repre	vehicle/vessel in which living individuals, not proper sent at Section 2) are in the fo	ty, so we can only
Are you requesting:	CCTV footage	ody cam data	
If relating to a vehicle: Really When was the footage reco	<u> </u>	Make and model or vessel name:	
Date:	Time from:	to:	

Description of incident (if relevant) and location:

## Section 4 – Privacy Notice

#### Please read the following before ticking the box to consent to us processing your information

- The Data Controller for the information you provide on this form is Cornwall IFCA, Chi Gallos, Hayle Marine Renewables Business Park, North Quay TR27 4DD.
- If something on this form is unclear or you need help before you can complete it, please contact our office on 01736 336842, or enquiries@cornwall-ifca.gov.uk
- Information you provide on this form will be used solely to process your request and will be held securely at our premises and/or on our electronic network for a period of 2 years after completion of the request. It will not be transferred outside of the European Economic Area or used for marketing purposes.
- We will need to share this information with authorised staff in other areas of the council in order to locate the information you are requesting access to or rectification/erasure of. In some circumstances we may also need to forward it to third parties in order to obtain their permission to release information we hold about you if it was originally provided by them. We will not share it with any other organisation unless required to do so by law.

Under GDPR and the DPA 2018 you have the right to:

- access information that we hold about you or have it rectified if it's inaccurate or incomplete (but you will need to provide evidence before we can do so)
  - have your information erased where we don't have a legal requirement to retain
  - withdraw your consent if you no longer wish us to process this request
  - restrict how we process your information, ie, object to us using your information for marketing or research purposes or in relation to a legal task or in the exercise of an official authority
  - request that a person reviews an automated decision where it has had an adverse effect on you
- If you would like to exercise these rights, please complete and submit this form with the appropriate documentation or, if you have concerns regarding the way we have processed your information, please contact us at the above address.
- Please refer any complaints to us initially so we can try to put things right. However, if you are unhappy with the way we have processed your information or how we have responded to your request to exercise any of your data rights, you can raise your concerns with the Information Commissioner's Office Tel: 0303 123 1113 https://ico.org.uk/concerns/

## Section 5 – Additional information about your request

- Under the General Data Protection Regulation and Data Protection Act 2018, the Authority has **30 calendar days** in which to process your request once original/certified identification has been received, verified and accepted and enough information to locate the data that has been requested; only then will this timescale come into force. You may also be contacted for further clarification before we can start your request.
- When making an application on behalf of a person who is unable to understand the Rights of Access, Rectification and Erasure process, you must do so only with their best interests in mind. Cornwall IFCA reserves the right to refuse a request if the release of personal information to another party is believed not to be in the best interests of the Data Subject.

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# Section 6 – Declaration

The declaration below is to be completed by the requestor, ie, the person identified in Section 1 of this request. Please be aware that misrepresentation may result in prosecution - knowingly or recklessly attempting to obtain personal data to which you are not entitled is an offence under the Data Protection Act 2018 and is punishable by an unlimited fine.						
I, Full name:						
certify that the information given on this form is true. I understand that it may be necessary for Cornwall Council to obtain further information in order to validate my request and locate the correct information and confirm that I have enclosed all of the following:						
	Proof of my identity (original or certified copy)					
	Proof of my name and address (original or certified copy)					
	Evidence to support a request to rectify or erase your data if applicable					
	V5 Registration Document (original or certified copy, requests for vehicle CCTV footage/ANPR data only)					
	Recent facial photograph (requests for CCTV footage of a person only)					
lf you	are not the Data Subject, we will also need:					
	Proof of their identity (original or certified copy)					
	Proof of their name and address (original or certified copy)					
	Written or legal authority to show you act on behalf of someone over 13 years of age or proof you hold parental responsibility for someone under 13 years of age (original or certified copy)					
Conse	ent to process personal data:					
I confirm that I have read and understood the Privacy Notice at Section 4 and consent to the information provided on this form being processed for the purposes of complying with this request and that without consent, Cornwall Council will be unable to proceed with my request.						
Signe	ed:		Date:			
Please send this completed form and supporting documentation to:						
Data I Cornv Chi G Hayle North Hayle	Protection vall IFCA allos Marine Renewables Business Park Quay					
lf you	do not understand something we are asking for o	or hav	ve any questions about the			

completion of this form, please email us at enquiries@cornwall-ifca.gov.uk or telephone us on 01736 336842