

Schedule 2 Part 1 Para. 2 Data Protection Act 2018 Disclosure Request (Request to View)

1. Requestor

First name(s):		Last name:			
Job title:					
Organisation:					
Address:					
Postcode:		Telephone:			
Email:					
2. Data subjec					
First name(s):		Last name:			
Current or last known address:					
Other identifying information e.g. previous address, other names the data subject is known by, NI number					

State the specific information you require – please also state the service areas of th council you wish us to search if known e.g. council tax, licensing, social care etc.
4. Reason for requesting disclosure include what you intend to do with the informatio
and how long you will retain it:
5. With reference to Schedule 2 Part 1 Para. 2 Data Protection Act 2018, and to Articles 6(1) and 9(2) of the GDPR, state why this disclosure is lawful.
If asking for information relating to criminal convictions and offences state your official authority and how you are authorised to process this information with regard to Article 10 GDPR or with reference to Schedule 1 DPA 2018.
6. How would not providing the information requested projudics the stated purpose?
6. How would not providing the information requested prejudice the stated purpose?

7. Information Provision – Post Viewing

We will notify you if we do not hold information or your request for disclosure is refused

If invited to view, printed copies of documentation may be provided on discussion with the Council Disclosures officer present.

Importantly, provision of these documents is **not** consent to use in Court or Legal Proceedings and this should be sought subsequent to the viewing.

8. Declaration and Authorisation

The authorising officer must be of the rank of police inspector or higher, or for other 'relevant bodies' a senior officer/manger. In the case of an inspector not being available at your location, we will accept an email from an inspector (or higher ranking officer) attaching this paperwork and confirming their approval.

Declaration

I certify that:

- Information requested is compatible with the stated purpose (section 4) and will not be used in anyway incompatible with that purpose
- I understand information given on this form is correct
- I understand that if any information given on this form is incorrect, I may be committing an offence under Section 170 Data Protection Act 2018

Requestor

Signed:		Date:			
Authorising Officer					
First name:		Last name:			
Job title:					
Signed:		Date:			

Where to send your request

Please note: If the form has not been fully or properly completed and authorised you will be asked to re-submit your application. Note also that disclosure remains at the discretion of Bristol City Council in the absence of a court order.

Send this form to:

Email: <u>subjectaccessrequest@bristol.gov.uk</u>