

CAMBRIDGESHIRE POLICE & CRIME COMMISSIONER,
PO BOX 688
HUNTINGDON PE29 6NP
Telephone: 0300 333 3456
Email: cambs-pcc@cambs.pnn.police.uk

DATA PROTECTION ACT 2018 – RIGHT OF ACCESS

SUBJECT ACCESS REQUEST FORM

This form is not mandatory, however, it captures information that will assist us in processing and locating information to provide you access to the personal data held locally by the Office of the Police and Crime Commissioner for Cambridgeshire and Peterborough (OPCC).

Your Rights

You have a right to be told whether Cambridgeshire Police and Crime Commissioner holds any information about you and a right to a copy of that information within one month, unless certain exemptions apply. You will be provided with that information only if you have provided satisfactory proof of your identity. Information may not have to be provided if someone else can be identified in or from the information. If you think that information might be held about you that may identify or have been provided by another person, you may want to get that person's written agreement to enable the information to be given to you, and send it with your application.

Police and Crime Commissioner's Rights

The provisions of the Data Protection Act (DPA) mean that in certain circumstances some personal data will not be provided. For example, you will not be provided with personal data if releasing it to you would be likely to prejudice a criminal investigation, or affect the rights and freedoms of others. The information you provide on this form will be used for processing your request. It will be held in line with our retention schedule, which is for 2 years from disclosure or from completion of any appeal, local or ICO.

Proof of Identity

Section 1 asks you to give information about yourself, which will help the Commissioner to confirm your identity. Due to the sensitive nature of personal data a request will not be processed unless your identity can be established.

As such your application must be accompanied by **COPIES of official**

document/s, which provide proof of your **name, date of birth and address.**

If you are requesting any photographs or media footage of yourself, your identity document **must** include a clear photograph of yourself to assist in identification.

If you wish for the response to be sent to your legal representative directly, please complete Section 4 of this form.

Please note you are not entitled to third party data through a subject access request. If third party information is required for legal proceedings your solicitor should handle disclosure in line with civil procedure rules, if proceedings have not commenced they would need to make a request using the legal proceedings exemption in Schedule 2, Part 1 of the DPA.

Returning this form

You can email the completed form, along with your identity document/s to:

Cambs-pcc@cambs.pnn.police.uk

Or send by post to: Office of the Police and Crime Commissioner, PO BOX 688, Huntingdon, PE29 6NP

For any other queries, please call 0300 333 3456.

Criminal records and visas

If you wish to request a copy of information held about you on the police national computer (cautions, convictions, warnings) or for the purpose of a visa application these requests need to be made to NPCC ACRO. The NPCC ACRO SAR1 form for Subject Access, as well as details on requesting a certificate for visa purposes can be found on their website <https://www.acro.police.uk/>. You can contact them for more information on **02380 479 920**.

Please use block capitals and black ink.

Section 1 – About Yourself (tick small boxes [] where appropriate)

Title: Mr [] Mrs [] Miss [] Ms [] Dr [] Rev [] Other (specify):	
Surname/Family Name:	
First Name(s):	
Maiden/Former Name(s):	
Gender: Male [] Female [] Unspecified []	Date of Birth:
Place of Birth: Town: _____	County: _____
Country: _____	
Applicants Home Address (This address MUST appear on your identity documents and will be the address to which the response will be sent by special delivery , which you will have to sign for or collect if you are not in. The identification provided MUST relate to this address.	
If you wish a reply to be sent to a different address than this you will need to provide evidence of your connection to this address and complete Section 4 at the end of this form.	
House Number/Name: _____	
Street: _____	
Town: _____	
County: _____	
Country: _____	
Post Code: _____	
*Contact Telephone Number: _____	
*Email Address: _____	
<i>* Not mandatory, but these details will assist us if we need to get back in touch with you to discuss your application.</i>	

Previous Addresses – If you have lived at your home address for less than 10 years, please provide previous addresses with dates on a separate piece of paper.

Section 2 – Details of Your request

This application is for requesting a copy of information held about you on Cambridgeshire Police and Crime Commissioner local information systems and paper records.

Do not use this form to request a copy of a criminal conviction history.

To help us find the information that we may hold about you, please complete this section as fully as possible. If it is something specific, for example details of a reported crime or incident, quote any reference number that you may have.

A description of the circumstances in which you had contact with the Office of Cambridgeshire Police and Crime Commissioner local:
Date(s) and time of contact:
Type of contact – email, phone etc:
Nature of incident/contact eg complaint, enquiry etc:
Reference number (if any):
A description of the information you are requesting:
Any other information:

If you are requesting photographs please supply a photograph of your face (e.g. Passport photo) to assist identification.

Section 3 – Declaration and signature (to be signed by the applicant)

The information which I have supplied in this application is correct, and I am the person to whom it relates.
Signature: _____ Date: _____
Included with form: 2 x Identity Documents [] Photo [](if applicable)
WARNING: - A person who impersonates or attempts to impersonate another may be guilty of an offence.

Delivery of your disclosure

Your request will be sent by special delivery and any discs will be encrypted to protect your personal data. You will need to sign for receipt of delivery, if you are not in a card will be left for you and you must collect your item within 18 days or it will be returned.

OFFICIAL USE ONLY (to be completed by officer receiving)

Application Checked & legible []		Location: Post: [] OR	
Identification documents checked []		Station: []	
Name [] Date of Birth [] Home Address [] Signature [] Letter of Authority []			
Details of documents produced:		Officer Completing:	
1. _____		Name: _____	
2. _____		Collar Number: _____	
_____		Date Application received complete: _____	

Section 4 – Details of solicitor/other agent and signed consent (to be completed ONLY if you wish for the response to be sent to a solicitor or other agent)

Agents Name	
Agents Reference Number	
Agents Address	
Postcode	
Telephone Number	
Email address	

Form of Authority

I [print name].....
Do consent / do NOT consent (delete as appropriate) to the information requested in my Subject Access application being released to: [agents name].....
I am aware of my rights under Article 15 of the General Data Protection Regulation/Section 45 of the DPA 2018 and what information is being shared with the above party.
SIGNED.....
.....
DATED.....
.....