

Third Party Data Subject Request Form

Part 1: Data Subject's details

Full name: _____

Address: _____

I acknowledge that _____ (insert name of third party) may receive personal data on my behalf for the following purpose:

Signed: _____ Date: _____
Data Subject

Part 2: Third Party's details

Full name: _____

Address: _____

Telephone no.: _____

Email address: _____

I confirm that I will take suitable and specific measures to safeguard the fundamental rights and freedoms of the individual this enquiry relates to.

Signed: _____ Date: _____
Third Party

Part 2 – Verification

Verification of the Data Subject identity and the Third Party's identity are required to accurately process your request

I enclose copy:

Passport

Driving Licence

Other

(note that any copies of identities received will be destroyed upon verification)

Part 3 – Details of Request

(Please provide as much information as possible to assist us in dealing with your request including the period during which the data was held)

Part 4 – Details for receiving data

If you are requesting access to your personal data, please confirm how you would like to receive the data

Email Post Collection

Other *(please specify)* _____

Part 5 – Declaration by the Data Subject

I Declare that, to the best of my knowledge, the information I have provided on this form is correct

Signature: _____ Data: _____

FOR OFFICE USE ONLY

I hereby authorise refuse

this Data Subject Request

Signed:

Date:

For further information on how Longford County Council process personal information can be found on our Privacy Statement on our website www.longfordcoco.ie