

Section A: Your Details

Title:		First Name(s):		Last Name:	
Address:					
			Postcode		
Date of Birth:			Telephone number		
Email address:					

Section B: Tick the statement that applies below then complete that section

<input type="checkbox"/>	I'm <u>only</u> requesting information about me (please go to section F)
<input type="checkbox"/>	I'm requesting information about someone who is under 13 or who lacks mental capacity (please go to section C)
<input type="checkbox"/>	I'm requesting information for someone who is 13 or over (please go to section D)
<input type="checkbox"/>	I'm representing someone else and <u>only</u> requesting information on them (please go to section E)

Section C - Someone who is under 13 or who lacks mental capacity:

Title:		First Name(s):		Last Name:	
Address:					
			Postcode		
Date of Birth:			Telephone number		
Your relationship to person in section C (e.g.: parent, guardian, solicitor):					

How we use your information

The information you give us will be used to progress your request and for related administrative purposes. All your information is treated with respect and in accordance with the Data Protection Act 2018. If you are making this request on behalf of someone else we may undertake checks with other agencies and other adults who have responsibility for this person to determine your right of access to the information. If you would like more information please see our website at www.staffordshire-pfcc.gov.uk/

Section D - Someone who is over 13:

Title:		First Name(s):		Last Name:	
Address:					
			Postcode		
Date of Birth:			Telephone number		
Your relationship to person in section C (e.g.: parent, guardian, solicitor, holder of a power of attorney):					

Section E – Third Party I’m representing someone else detailed below:

Title:		First Name(s):		Last Name:	
Address:					
			Postcode		
Date of Birth:			Telephone number		
Your relationship to person in section C (e.g.: solicitor, holder of a power of attorney, deputy, executor):					

Section F – Further details of the subject access request:

Please provide any further information in this section that could help identify information held on any of the individuals listed on this form.

Previous names:	
Previous addresses:	

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Any other information that would help us find the information you are requesting

Section G – Evidence of Identity being sent. Tick all applicable boxes:

Please note: The period of 30 days in which we must respond to your request cannot commence until we are satisfied that proper documentation has been received. If insufficient identification is provided, your application may be delayed.

	Copy of your ID – see below for acceptable forms of ID
	Copy of ID for the person you are requesting information about (if applicable)
	Copy of proof of your right to someone else's records (proof of parental responsibility, relevant power of attorney, deputy order, letters of authorisation)

Section H – Signatures:

Declaration: I certify that the information given on this application form to the Commissioner's Office for Police, Fire and Rescue, and Crime is true and that I may be committing a criminal offence if I fail to do so. I understand that it is necessary for this Office to confirm my identity.

Person named in section A

Signature:		Date:	
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If applicable:

Person named in section D

Signature:		Date:	
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Acceptable ID

Please supply one from the following categories (copies only).

- Current passport
- residence permit issued by Home Office to EU Nationals on sight of own country passport
- current UK photocard driving licence
- current benefit book or card or original notification letter from the Department for Work & Pensions confirming the right to benefit
- building industry sub-contractor's certificate issued by the Inland Revenue
- recent Inland Revenue tax notification
- current firearms certificate
- birth certificate
- adoption certificate
- marriage certificate
- divorce or annulment papers
- Application Registration Card (ARC) issued to people seeking asylum in the UK (or previously issued standard acknowledgement letters, SAL1 or SAL2 forms);
- Home Office letter
- police registration document
- HM Forces Identity Card

Please return this form and all relevant documents to@

SAR Requests,
Staffordshire Commissioner's Office for Police, Fire and Rescue, and Crime,
Block 9,
Staffordshire Police Headquarters,
Weston Road,
Stafford,
Staffordshire, ST18 0YY

Or via email to

PCC@staffordshire-pfcc.pnn.gov.uk

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