

Subject Access Request Form

Section A: Your Details (person making the request)

Full Name:		Tenancy Ref.:
Address:		
		Postcode:
Tel:	Mobile:	Fax:
Email		

Are you:	A current or former saha resident <input type="checkbox"/>	A current or former staff member <input type="checkbox"/>
	Another individual (please tell us your connection with saha) <input type="checkbox"/> _____	

Section B: The Data Subject

The Data Subject is the person whose personal information you are requesting.

Are you the Data Subject?	Yes (please go to Section C) <input type="checkbox"/>	No (please continue below) <input type="checkbox"/>
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If no, you must enclose written authority from the Data Subject, to show you are acting on their behalf. Please also describe your relationship with the Data Subject, which leads you to make a request on their behalf:

Details of the Data Subject (if different to Section A)

Full Name:		Tenancy Ref.:
Address:		
		Postcode:
Tel:	Mobile:	Fax:

Email

Are you:	A current or former saha resident <input type="checkbox"/>	A current or former staff member <input type="checkbox"/>
	Another individual (please tell us your connection with saha) <input type="checkbox"/> _____	

Section C: Personal Information you are requesting

Please use this section to tell us what personal data you would like to see. 'Personal data' means information relating to the Data Subject as an individual covering things like their tenancy details and rent payments and includes special categories of personal information. It does not routinely cover information relating to maintenance orders or property condition, as these do not usually contain personal data.

Please be specific as this will speed up our response.

Please indicate under which service(s) your request falls and what data / documents you would like to see.

Service	Information/documents you would like to request
Lettings and transfers	
Anti-social behaviour	
Collection of rent or service	
Setting of rent or service charge	
Customer relations	
Tenancy	
Other (please specify)	

Please indicate under which service(s) your request falls and what data / documents you would like to see.

Note: If CCTV search wanted, please specify date(s), time(s) and location:

Section D: Declaration

I certify that the information given on this form is true. I understand that it may be necessary to confirm my/the data Subject's identity and provide more detailed information before disclosing any data.

Signed:

Name (please print):

Date:

Please return the completed form to:
Salvation Army Housing Association

2nd Floor 53-54 Victoria Square

Bolton

BL1 1RZ