Please ensure that you include information (including changes) relating to any information provided

# DATA SUBJECT DETAILS:

|  |  |  |
| --- | --- | --- |
| Title |  | Notes |
| Current Surname |  |  |
| Any previous names |  |  |
| First name(s) |  |  |
| Current address |  |  |
| Previous Address if applicable |  |  |
| Telephone number: |  |  |
| Home |  |  |
| Work |  |  |
| Mobile |  |  |
| Email address |  |  |
| Date of birth |  |  |
| ID 1 provided  ID 2 provided | Passport | Driving licence  Birth certificate  1 Utility bill | 1 Bank statement (last 3 months)  1 Rent book (from last 3 months)  Current vehicle Registration(v5C) | Please Select |
| Please Select |
| Details of data requested: | Please use final comments box if more space is required |  |
| Reason for Request |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| 2. DETAILS OF PERSON REQUESTING THE INFORMATION (if not the data subject) | | | |
|  | Notes | |  |
| Are you acting on behalf of the data subject with their [written] or other legal authority? | For example, letter of authority, letters or official forms addressed to you on behalf of the data subject or power of attorney. | | Yes  No |
| If ‘Yes’ please state your relationship with the data subject (e.g. parent, legal guardian or solicitor) |  | | |
| Title |  | Notes | | |
| Surname |  |  | | |
| First name(s) |  |  | | |
| Current address |  |  | | |
| Telephone number: |  |  | | |
| Home |  |  | | |
| Work |  |  | | |
| Mobile |  |  | | |
| Email address |  |  | | |

|  |
| --- |
| COMMENTS |
|  |

|  |  |
| --- | --- |
| DECLARATION | |
| I, ………………………………………………………, the undersigned and the person identified in (1) above, hereby request that What Direct Ltd provide me with the data about me identified above. | |
| Signature: | Date: |

|  |  |
| --- | --- |
| DECLARATION | |
| I, ………………………………………………………, the undersigned and the person identified in (2) above, hereby request that What Direct Ltd provide me with the data about the data subject identified in (1) above. | |
| Signature: | Date: |

This form, together with the required proof should be sent by secure method to:

Practice Principals

What Direct Ltd

Pavilion 2000

Amy Johnson Way

York

YO30 4XT

On receipt of your form and documents, we will acknowledge the request by return and fulfil the request under the requirements of GDPR. As we will need original documents to confirm your ID – we would recommend that you do not send them via standard post and would suggest Special Delivery or other secure method. We will return them securely and will not keep copies once we have validated your information.