



**Gwasanaeth Tân ac Achub**  
De Cymru  
South Wales  
**Fire and Rescue Service**

## **Request for Personal Data – South Wales Fire & Rescue Service**

Data Protection legislation provides you, the data subject, with a right to request a copy of the data/information public authorities hold about you or to authorise someone to request that information on your behalf.

Please complete this form if you wish to see the data South Wales Fire and Rescue Service (SWFRS) holds about you. Your request will be processed within one calendar month, upon receipt of a fully completed form (assistance with completing the form can be provided if required), clarification of the data you are requesting, and proof of identity.

### **Proof of Identity**

In order to progress your request, SWFRS must be assured of your identity, therefore we will require proof of this, as well as proof of address to ensure that we send the required information to the correct place.

Proof of identity should include copies of two forms of documentation such as a birth certificate, driving licence, passport and documentation proving your current address – such as a recent bank statement or utility bill.

Should you have difficulty in providing the relevant documents, contact the Data Protection Officer on 01443 232213 / [dataprotection@southwales-fire.gov.uk](mailto:dataprotection@southwales-fire.gov.uk)

### **Section 1 – Data Subject Details** (the individual that the information is about)

Please fill in your details (the data subject). If you are not the data subject and are acting on behalf of someone else, please fill in the data subject details below, not your own.

<b>Title:</b> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other –
<b>Surname/ Family Name:</b>
<b>First Name(s)/Forenames:</b>
<b>Date of Birth:</b>
<b>Address:</b>
<b>Postcode:</b>

<b>Previous address:</b>
<b>Postcode:</b>
<b>Daytime Telephone Number:</b>
<b>Email address:</b>
<b>I am enclosing copies of the following as proof of identity:</b>
Birth certificate <input type="checkbox"/> Driving Licence <input type="checkbox"/> Passport <input type="checkbox"/>  An official letter to my address <input type="checkbox"/>

**Employment Information**

<b>Service Number:</b>	
<b>Dates Employed:</b>	
<b>Department/Stations worked at, including approximate dates:</b>	

**Section 2 – 3<sup>rd</sup> Party Details**

Please complete this section of the form with your details if you are acting on behalf of someone else (i.e. the data subject).

<b>Title:</b> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Other –
<b>Surname/ Family Name:</b>
<b>First Name(s)/Forenames:</b>
<b>Date of Birth:</b>
<b>Address:</b>
<b>Postcode:</b>

**Previous address:**

**Postcode:**

**Daytime Telephone Number:**

**Email address:**

**I am enclosing copies of the following as proof of identity:**

Birth certificate     Driving Licence     Passport

An official letter to my address

**What is your relationship to the data subject? (e.g. parent, carer, legal representative)**

**I am enclosing copies of the following as proof of legal authorisation to act on behalf of the data subject:**

Letter of authority

Lasting or Enduring Power of Attorney

Evidence of parental responsibility     Other (give details):

#### **Section 4 Information Requested**

Personal record File (HR record)

Occupational Health File

Other (please specify below)

Where other information is requested, please provide as much detail as possible about what that may be and where it may be held – for example if it is held by a specific department/manager, Time and Dates:

**Data Subject Declaration:**

I certify that the information provided on this form is correct to the best of my knowledge and that I am the person to whom it relates. I understand that SWFRS is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.

**Name:****Signature:****Date:****Authorised Person Declaration (if applicable):**

I confirm that I am legally authorised to act on behalf of the data subject. I understand that SWFRS is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.

**Name:****Signature:****Date:****Warning**

It is an offence for a person knowingly or recklessly to obtain or disclose personal data without the consent of the controller (SWFRS), to procure the disclosure of personal data to another person without the consent of the controller or, after obtaining personal data, to retain it without the consent of the person who was the controller in relation to the personal data when it was obtained.

**I wish to:**

Receive the information in electronic format (some files may be too large to transmit electronically and we may have to supply in CD format)

\*Security transmissions to your email account and any after event cannot be guaranteed, we recommend you use a trusted email account, regularly change your password and keep up to date with antivirus/malware security protections

Receive the information by post using the Royal Mail Signed For® service\*

\*Please be aware that if you wish us to post the information to you, we will take every care to ensure that it is addressed correctly. However, we cannot be held liable if the information is lost in the post or incorrectly delivered or opened by someone else in your household. Loss or incorrect delivery may cause you embarrassment or harm if the information is sensitive

Collect the information in person

View a copy of the information only

Go through the information with a member of staff