Access Request Form

1. **Details of the inquirer. Please print or write clearly.**

|  |  |
| --- | --- |
| Name: | Telephone no.: |
| Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email address: |

1. **Are you the data subject?**

|  |  |
| --- | --- |
| **□ YES**: I am the data subject and I enclose proof of my identity (see below). | **□ NO**: I am not. I am acting on data subject’s behalf and I enclose the data subject’s written authority and proof his/her identity and my own identity (see below). |

1. **Proof of identity of inquirer**

A copy of the inquirer’s proof of identity must be included. The following are considered proof of Identity: Passport, photo driver’s license, national identity card, or birth certificate.

1. **Details of the data subject (COMPLETE ONLY IF INQUIRER IS NOT THE DATA SUBJECT)**

|  |  |
| --- | --- |
| Name: | Telephone no.: |
| Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Email address: |

1. **Written authority from the data subject (COMPLETE ONLY IF INQUIRER IS NOT THE DATA SUBJECT)**

If the inquirer is acting on behalf of data subject, the data subject must fill in and sign. In the alternative, a written authorization from the data subject must accompany the present request. If a general power of authority exists, you can produce it in substitution of a specific authorization. Otherwise, the data subject must fill in the following:

Date \_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(NAME OF DATA SUBJECT) authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(NAME OF INQUIRER) to act on my behalf to request information from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (LAW FIRM’s NAME) about processing of my data.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(signature of data subject)

A copy of data subject’s proof of identity must be included. The following are considered proof of Identity: Passport, photo driver’s license, national identity card, or birth certificate.

1. **Your rights**

Pursuant to GDPR Article 15 data subjects have the right to obtain from Law Firm:

* 1. Confirmation as to whether or not personal data of data subject is being processed;
  2. If data is indeed processed, data subject has the right to access the personal data and obtain from Law Firm the following:
     1. the purposes of the processing;
     2. the categories of personal data that Law Firm processes about data subject;
     3. the recipients or categories of recipients to whom personal data have been or will be disclosed, in particular recipients in third countries or international organizations;
     4. where possible, the envisaged period for which personal data will be stored, or, if not possible, the criteria used to determine that period;
     5. where the personal data is not collected from data subject, any available information as to its source;
     6. whether automated decision-making, including profiling is done and “meaningful information about the logic involved” and “the significance and the envisaged consequences of such processing” for data subject;
     7. if personal data is transferred to a third country or to an international organisation, data subject must be informed of the appropriate safeguards pursuant to Article 46 relating to such transfer.

Data subject is informed that the information from 1 to 7 above can be delivered also by providing LAW FIRM’s privacy notice.

And data subject is also being informed of the following:

* + - 1. Data subject has the right to request from Law Firm rectification or erasure of personal data or restriction of processing of personal data concerning me/data subject or to object to processing.
      2. Data subject has the right to lodge a complaint with a supervisory authority.

**VII: Declaration to be completed by the inquirer**

I confirm that I have read and understood the terms of this subject access form and certify that the information given in this application to LAW FIRM is true. I understand that it is necessary for LAW FIRM to confirm my/the data subject’s identity and it may be necessary to obtain more detailed information in order to locate the correct personal data.

**Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please print your name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Documents which must accompany this application:**

**□**Evidence of inquirer’s identity

**□**Evidence of data subject’s identity (if different from the inquirer)

**□**Authorization from data subject to act on his/her behalf (if applicable) (see section IV)

**All that considered:**

***I, the inquirer, request that* INSERT NAME OF LAW FIRM**

***confirm that personal data concerning me/data subject is being processed and which data is processed and I also request the other information that I have the right to receive pursuant to Section VI above.***

**Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please print your name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_