# SUBJECT ACCESS REQUEST FORM HEREFORDSHIRE CCTV SURVEILLANCE SYSTEM DATA PROTECTION ACT 2018

(incorporating the GDPR 2018)

# How to Apply For Access To Information Held On the Herefordshire CCTV System

These notes explain how you can find out what information, if any, is held about you on the CCTV System. Please note that CCTV images are only retained for **30** days.

### Your Rights

Subject to certain exemptions, you have a right to be told whether any personal data is held about you. You also have a right to a copy of that information in a permanent form except where the supply of such a copy is not possible or would involve disproportionate effort, or if you agree otherwise. Herefordshire Council will only give that information if it is satisfied as to your identity. If release of the information will disclose information relating to another individual(s), who can be identified from that information, the Council is not obliged to comply with an access request unless –

- The other individual has consented to the disclosure of information, or
- It is reasonable in all the circumstances to comply with the request without the consent of the other individual(s)

### **Herefordshire Council's Rights**

Herefordshire Council may deny access to information where the Regulation allows. The main exemptions in relation to information held on the CCTV System are where the information may be held for:

- Prevention and detection of crime
- Apprehension and prosecution of offenders

And giving you the information may be likely to prejudice any of these purposes.

### Fee

A fee to deal with this request is not chargeable in most circumstances.

### Applications can be made using this form or verbally

**The Application Form:** (NB all sections of the form must be completed. Failure to provide all the information may delay your application)

- Section 1 Asks you to give information about yourself that will help the Council to confirm your identity. Herefordshire Council has a duty to ensure that information it holds is secure and it must be satisfied that you are who you say you are.
- Asks you to provide evidence of your identity by producing TWO official documents (which between them clearly show your name, date of birth and current address) together with a recent full-face photograph of you.
- **Section 3** Asks you to confirm whether you will accept just viewing the information, or if you want a copy of the information.
- **Section 4** You must sign the declaration

When you have completed and checked this form, take or send it together with the required TWO identification documents and photograph to:

CCTV Commissioning Officer, Herefordshire Council, Shirehall, St Peters Square, Hereford HR! 2HX

Verbal Requests: These can be made direct to the CCTV Commissioning Officer on 01432 261713

If you have any queries regarding this form, or your application, please ring the above number.

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### **SECTION** 1 About Yourself

The information requested below is to help the Council (a) satisfy itself as to your identity and (b) find any data held about you.

# PLEASE USE BLOCK LETTERS **Title** (tick box as appropriate) Mr Mrs Miss Ms Other title (e.g. Dr., Rev., etc.) Surname/family name First names Maiden name/former names Sex (tick box) Male Female Height **Date of Birth** Place of Birth Town County **Your Current Home Address** (to which we will reply) Post Code Tel. No. A telephone number will be helpful

## SECTION 2 Proof of Identity

in case you need to be contacted.

To help establish your identity your application must be accompanied by **TWO** official documents that between them clearly show your name, date of birth and current address.

For example: a birth/adoption certificate, driving licence, medical card, passport or other official document that shows your name and address.

Also a recent, full face photograph of yourself.

Failure to provide this proof of identity may delay your application.

SEC	TION 3	Supply of Info	ormation			
You h	• • •	certain exceptions,	to receive a copy of the	information	in a permanent form.	Do
(a)	View the information	and receive a nerm	nanent conv	YES / NO		

YES / NO

NOW – please complete Section 4 and then check the 'CHECK' box (on page 5) before returning the form.

### SECTION 4 Declaration

Only view the information

(b)

<b>DECLARATION</b> (to be signed by the applicant)					
The information that I have supplied in this application is correct and I am the person to whom it relates.					
Signed by	Date				
Warning – a person who impersonates or attempts to impersonate another may be guilty of an offence.					

SECT	ION	5

## To Help us Find the Information

If the information you have requested refers to a specific offence or incident, please complete this Section.

Please complete a separate box in respect of different categories/incidents/involvement. Continue on a separate sheet, in the same way, if necessary.

Were you: (tick box below)
A person reporting an offence or incident
A witness to an offence or incident
A victim of an offence
A person accused or convicted of an offence
Other – please explain
Data(a) and time(a) of incident
Date(s) and time(s) of incident
Place incident happened
Brief details of incident

Before returning this form:	Have you completed ALL Sections in this form?
Please check:	Have you enclosed TWO identification documents?
	Have you signed and dated the form?

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OFFICIAL USE ONLY						
Please complete ALL of this Section (refer to 'CHECK' box above).						
Application checked and legible?	Date Application Received					
Identification documents checked?	Fee Paid If Applicable					
Details of 2 Documents (see page 3)	Method of Payment					
	Receipt No.					
	Documents Returned?					