

Appendix 2 Template Subject Rights Request Form

Credit Union use only:

Ref. No: CUSR -



Credit Union

LIMERICK & DISTRICT SUBJECT RIGHTS REQUEST

FORM

This form is to be used by individuals who wish to exercise their rights under data protection law. It will be of particular use if you requesting to find out what information, if any, the credit union is holding or is processing that relates to you. There is a guide to assist you in filling in this form. The information requested below will help the credit union (a) satisfy itself as to your identity and (b) help you exercise your rights (subject to any exemptions or restrictions) including find any personal data held about you. Please complete the areas below.

Section 1 – About yourself¹

Title (Mr, Mrs etc.)		Date of Birth	
Surname/Family Name			
First Names			
Maiden/Former surnames			
Telephone Number (Day)			
Email address			
Home Address			
Eircode/Post Code			
Member Account Number			

Section 2- Requests Made on a Data Subject's Behalf²

Please complete this section of the form with your name and contact details if you have legal authority to act on the data subject's behalf.

First and last name:	
Home address:	
Date of birth:	
Telephone number:	
E-mail address:	

Section 3 – Which Right(s) are you exercising?

¹ Proof of identity-To help establish your identity and ensure that we only send personal data to whom it belongs, we may ask you provide additional documentation to us. We accept a photocopy or a scanned image of one of the following as proof of identity: [passport OR a driver's license. [Please also attach a copy of a bank or credit card statement or utility bill showing your current address and dated within the last 6 months.] If you have changed your name, please provide the relevant documents evidencing the change, bank statement, child benefit book, pension book (or other equivalent/similar official document)

If you do not have any of these forms of identification available, please contact DPO for Limerick & District Credit Union Ltd, at Redgate, Limerick, Co. Limerick.

² Requestor's will have to establish proof of identity and legal authority. We may accept a copy of the following as proof of your legal authority to act on the data subject's behalf: [a written consent signed by the data subject, a certified copy of a Power of Attorney, or evidence of parental responsibility]

Right	Please tick appropriate box
Information i.e. our Privacy Notice(s)	<input type="checkbox"/>
Access their own personal data (Subject Access Request)	<input type="checkbox"/>
Rectify personal data	<input type="checkbox"/>
Erase personal data	<input type="checkbox"/>
Restrict data processing	<input type="checkbox"/>
Object to data processing	<input type="checkbox"/>
Receive a copy of your personal data or transfer their personal data to another data controller (Portability)	<input type="checkbox"/>
To intervene in automated decisions about you (including profiling)	<input type="checkbox"/>

Section 4 – Helping us with your rights request

Please use the space below to provide further details that may help to deal with your rights request

Section 5 – Declaration

Declaration (to be signed by the applicant)

I confirm that the information provided on this form is correct and that I am the person whose name appears on this form. I understand that: (1) Limerick & District Credit Union may confirm proof of identity and may need to contact me again for further information; (2) my request will not be valid until the credit union receives all of the required information to process the request; and (3) I am entitled to one free copy of the personal data I have requested, and acknowledge that for any further copies I request, the credit union may charge a reasonable fee based on administrative costs.

Signature		Date	DD/MM/YEAR
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Warning – attempting to obtain personal data to which you are not entitled may be an offence under the data protection legislation

Authorised Person Signature

I confirm that I am authorised to act on behalf of the data subject. I understand that Limerick & District Credit Union Ltd must confirm my identity and my legal authority to act on the data subject's behalf, and may need to request additional verifying information.

Signature		Date	DD/MM/YEAR
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Warning – attempting to obtain personal data to which you are not entitled may be an offence under the data protection legislation

Checklist (for Credit Union use only)

Date Application Rec'd		Application Signed	Yes / No
Identification (a) - Details		Application Complete	Yes / No
Identification (b) - Details		Further ID Info requested	Yes / No
Original Docs. Returned		Identification checked	

