

# Subject Access Request

## Section 1 – Applicant Details

Title (please tick one):	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/>	Title (please state):
Forename(s):		
Family Name:		
Previous Family Name:		
Other name(s) known by:		

## Section 2 – Applicant Details

Current Address:	
Postcode	
Daytime Telephone No:	
Email Address:	
Previous Address:	
Postcode:	
Previous Address:	
Postcode:	

## Section 3 – Request type

Right to Object	<input type="checkbox"/>	Right to Erasure	<input type="checkbox"/>
Right to Rectification	<input type="checkbox"/>	Right to Restrict Processing	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>

## Section 4 – Timescale

If you have specific reasons for requiring data by a specific date please give details below:

(a) Date required: (usually 1 month)
(b) Reason (for example if requesting rectification please identify clearly changes)

Signature of Applicant:	Date:
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Once complete, please send a signed copy of this for to the Data Protection Officer

Data Protection Officer  
Moores Furniture Group Limited  
Unit 350  
Thorp Arch Estate  
Wetherby  
West Yorkshire LS23 7DD

dpo@moores.co.uk

**ADDENDUM: TO BE COMPLETED IF FORM NOT SUBMITTED BY APPLICANT**

**Section 5 – Representative Details**

(If completed Moores Furniture Group Ltd will reply to the address you provide in this section)

Name of Representative:	
Company Name:	
Address & Postcode:	<hr/> <hr/> <hr/>
Daytime Telephone No:	
Email Address:	
Relationship to Applicant	

**Section 6 – Proof of the relationship**

Please note. We may require proof of relationship in order to process the request – this will be clearly communicated if needed

**Section 7 – Authority to release information to a Representative**

A representative needs to obtain authority from the applicant before personal data can be released. The representative should obtain the applicant’s signature below, or provide a separate note of authority.

This must be an original signature, not a photocopy (tip: using blue ink often helps verification).

If the applicant is signing as the guardian of a child under 12, proof of legal guardianship must also be provided.

I hereby give my authority for the representative named in Section 5 of this form to make a Subject Access Request on my behalf	
Signature of Applicant:	Date:
Signature of Representative:	Date: