

SUBJECT ACCESS REQUEST

Please make sure you:

- **read the guidance notes**
- **complete the form in block capitals and black ink**
- **complete the appropriate sections**

Please note that APCS do not provide subject access information on disclosure information, barring information or disclosure & barring information.

For subject access with the disclosure & barring service please click here:-

www.gov.uk/government/publications/dbs-subject-access-request

For Disclosure Scotland, you can call 03000 2000 40 (Monday to Thursday 8.30am - 5pm, Friday 8.30am to 4.30pm), or write to:

**Corporate Governance
Disclosure Scotland
PO Box 250
GLASGOW
G51 1YU**

Or alternatively visit their website:- www.mygov.scot/about-disclosure-scotland/

GUIDANCE NOTES

Please read these guidance notes fully before filling in the form. The notes contain important information about how the form should be completed.

1 Your right of subject access – Access Personal Checking Services Ltd

You are entitled to be told if the Access Personal Checking Services (APCS) holds any information about you and if so to be provided with a copy of that information. This is called the 'Right of Subject Access'. When you make an application for subject access to APCS, we must:

- tell you whether we hold any data on you; and
- give you a copy of this data in a clear form.

We are required to fulfil your request within one month of receiving all of the following:

- Subject Access application form;
- sufficient documentation to verify your identity.

2 Verifying your identity

Before we are able to release any of your data, we must be sure of your identity. Your application must be accompanied by a minimum of two original pieces of official identity documentation which between them provide sufficient information to prove your name, date of birth, current address and signature. Examples of this are:

Document 1 Passport or driving licence (must be valid)

Document 2 Bank statement or Utility Bill (must be issued within last 3 months)

The above documents must be originals. We will not accept photocopies. We advise that you send in your identity documents via secure means. Your documents will be held securely by APCS, and sent back to you as soon as we have verified your identity. Your documents will be returned via secure delivery.

3 Completing the Application Form

The application form has been designed for ease of use. Please ensure that you complete all the necessary questions.

4 Contact details

Please send completed application forms to: Subject Access Department, Access Personal Checking Services Ltd, 46 Seaview Road, Wallasey, Merseyside, CH45 4LA

5 Subject Access Request Complaints

If you are dissatisfied with the way your Subject access request application (SAR) has been processed and/or wish to dispute any information contained within the SAR information received you can request a review by the Data Protection Officer by using the contact details above.

Please note: We are only able to amend information that is owned by APCS. If your dispute is relating to information that has been provided to us by a third party you will need to raise this separately with the owner of the information. Please note – APCS retain Subject Access information for a maximum of 6 months in case of review. After 6 months the copy of the Subject Access information is securely destroyed.

SUBJECT ACCESS APPLICATION FORM

The information requested below is to help us APCS to confirm your identity and locate any data held about you.

SECTION 1 – About you

Surname/Family Name:.....Title:

Forename(s):.....

Maiden/Former Names.....

Current address:.....

.....

.....Postcode:.....

Date of birth:..... Age (Years).....

Place of birth (Town & Country).....

Gender: Male Female

Telephone Number:

Mobile Number:.....

Email Address:.....

Telephone numbers and email addresses will be helpful in case we need to contact you for any reason.

Please note - if we request any additional information, we can only accept your response by post for security reasons.

Please provide the addresses you have lived at for the last 5 years.

If you can't provide us with all of your previous address information, please give an explanation as to why this isn't possible with your application form.

SECTION 1 – About you (continued)

Previous Address 1.....
.....
.....Postcode.....

Previous Address 2.....
.....
.....Postcode.....

Previous Address 3.....
.....
.....Postcode.....

Previous Address 4.....
.....
.....Postcode.....

Previous Address 5.....
.....
.....Postcode.....

Previous Address 6.....
.....
.....Postcode.....

SECTION 2 – Personal data sought

To help us locate all the information that may be held on you, please supply any additional details below (and continue on a separate sheet if necessary). We advise you to include, where relevant, a description of the information you are looking to get. For example it would be useful for us to be advised of a description of the circumstances in which you have made contact with the APCS.

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SECTION 3 – Declaration (to be signed by applicant)

I certify that the information I have provided above is correct and I am the person to whom it relates.

Signed.....

Print Name.....

Date.....

Warning – A person who impersonates another or attempts to impersonate another may be guilty of a criminal offence.

Thank you for taking the time to complete the form in full. In the event that additional details are required, APCS will contact you in writing at your current address.

Submission of form and advice

When completed, please return your subject access application form together with your identity documents to:
Access Personal Checking Services Ltd
46 Seaview Road
Wallasey
CH45 4LA

FOR OFFICIAL USE ONLY

To be completed by Access Personal Checking Services Ltd staff member receiving Subject Access.

Check that the form has been completed is legible and you are satisfied with the applicants' identity. The complete the form below accordingly.

Date application received.....

Application is legible? Yes/No

Application and Identification documents checked? Yes/No

List Identity document(s) provided (including name of person).....

.....

Print name of person completing.....

Signature.....

If the application is rejected this box needs to be completed by staff member receiving Subject Access.

Date application rejected.....

Reasons for rejection.....

Action taken.....

When closed.....

Staff member