

GDPR (2018)

CCTV Data Subject Access Request

Please complete this form in **BLOCK CAPITALS** and read the guidance notes on page 5

REQUEST NUMBER		DATE REQUEST RECEIVED	
This Section Official Use Only		DATE REQUEST COMPLETED	

Section 1: About Yourself: (Details of Data Subject)

Title	MR	MRS	MISS	Ms	DR	Rev	Other (please State)	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SURNAME/FAMILY NAME			FIRST NAME			MIDDLE/OTHER NAMES		
If you have changed your name in the last 10 years please give your previous name(s) below.								
SURNAME/FAMILY NAME			FIRST NAME			MIDDLE/OTHER NAMES		
GENDER	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	OTHER <input type="checkbox"/>	RATHER NOT SAY <input type="checkbox"/>		HEIGHT (To assist with identification)		
DATE of BIRTH (<i>dd/mm/yyyy</i>)			PLACE of BIRTH					
CURRENT HOME ADDRESS (To which we will reply) (Must NOT be a PO Box address)						POSTCODE		
If you have been at your current address for less than 3 years please provide your previous address(es) below								
PREVIOUS HOME ADDRESS(es) Lived at within the last 3 years (Must NOT be a PO Box address)						POSTCODE		
Please tick the box to indicate preferred method of contact: Telephone <input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/>								
TELEPHONE NUMBER						EMAIL ADDRESS		

Section 2: Are You The Data Subject?

<input type="checkbox"/> Yes If you are the data subject please go to section 4	<input type="checkbox"/> No If you are acting on behalf of the data subject, please go to section 3
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Section 3a: Details of the person requesting the CCTV Data (If different to section 1)

Title	MR	MRS	MISS	Ms	DR	Rev	Other (please State)	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SURNAME/FAMILY NAME			FIRST NAME			MIDDLE/OTHER NAMES		
If you have changed your name in the last 10 years please give your previous name(s) below.								
SURNAME/FAMILY NAME			FIRST NAME			MIDDLE/OTHER NAMES		
GENDER	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>	OTHER <input type="checkbox"/>	RATHER NOT SAY <input type="checkbox"/>				

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DATE of BIRTH (<i>dd/mm/yyyy</i>)		PLACE of BIRTH	
CURRENT HOME ADDRESS (To which we will reply) (Must NOT be a PO Box address)			
	POSTCODE		
If you have been at your current address for less than 3 years please provide your previous address(es) below			
PREVIOUS HOME ADDRESS(es) Lived at within the last 3 years (Must NOT be a PO Box address)			
	POSTCODE		
Please tick the box to indicate preferred method of contact: Telephone <input type="checkbox"/> Email <input type="checkbox"/> Post <input type="checkbox"/>			
TELEPHONE NUMBER		EMAIL ADDRESS	

Section 3b: Relationship with data subject

Please describe your relationship with the data subject that leads you to make this request on their behalf:

Section 3c: Authority to release information

<p>A representative needs to obtain authority from the data subject before personal data can be released. The representative should obtain the data subject's signature below. This must be an original signature, not a copy (tip: using blue ink often helps verification).</p> <p>If the data subject lacks capacity to give authority in this way, the representative should provide evidence of the authority that it has, such as proof of legal guardianship for children under 12 or a power of attorney.</p> <p>I hereby give my authority for the representative named in Section 3 of this form to make a Data Subject Access Request on my behalf under the General Data Protection Regulation (2018)</p>	
Signature of Data Subject:	Date:

Section 4: Proof of Identity

<p>In order to prove the data subject's identity, we need to see copies of two pieces of identification, one from list A and one from list B below. Please indicate which ones you are supplying. Please do not send originals.</p> <p>In addition, if you are acting on the data subject's behalf, we also need to see evidence of your identity. Please send us two pieces of identification, one from list A and one from list B below. Please do not send originals.</p> <p>If your Photo ID does not reflect your current appearance please supply a recent full face photograph to assist in identifying you in the CCTV footage. (If we are unable to identify you we will be unable to complete your request.)</p>	
<p>List A (one from below)</p> <ul style="list-style-type: none"> Passport/Travel Document Photo driving licence National Identity Card ARC Card 	<p>List B (plus one from below)</p> <ul style="list-style-type: none"> Utility bill showing current home address Bank statement or Building Society Book A letter sent to you by Market Weighton Town Council

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Section 5: Details of the Data required

DATA REQUIRED. Please explain in as much detail as possible what it is that you require from our CCTV system. Please use an additional sheet if required.

WHAT IS THE REASON YOU WANT THIS DATA? Please refer to the guidance notes on page 5 regarding data you can request.

Date, Time and Place of incident or occurrence.

The date we receive this form MUST be less than 31 days from the incident date.

DATE (dd/mm/yyyy)

TIME (From<>Until)

<>

Place of Incident or Occurrence

///What3Words
<http://what3words.com>

If you use the ///What3Words website or Smartphone App this will greatly improve the chance of identifying the data you are requesting.

What 3 Words address

///

Vehicle Identification

If your request relates to a vehicle please give as much information as possible such as the registration mark, make, model, colour. We will also need a copy of the VC5 registration document for the vehicle.
If the vehicle was moving, please state on which road and in which direction. Please use ///What3Words if possible for this.

Vehicle Information

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Section 6: Declaration

The information which I have supplied in this application is correct, and I am the person to whom it relates or a representative acting on his/her behalf. I understand that Market Weighton Town Council may need to obtain further information from me/my representative in order to comply with this request.

I acknowledge that a person who impersonates or attempts to impersonate another may be guilty of an offence.

Signature of Data Subject/Representative:.....Date:.....

When complete please send this form along with your identity documents to the following address:

Town Clerk
Market Weighton Town Council
Town Hall
37 High Street
Market Weighton
YO43 3AQ

By completing this form you agree to your data being processed for the purpose of complying with the General Data Protection Regulations (2018).

You further agree that you have read, understand and agree with our Privacy Policy.

You also understand that once your CCTV Data has been supplied to you its use, security and safe disposal are your responsibility.

Guidance notes for completion of this CCTV Data Subject Access Request

Section 1: About Yourself

- Please provide your First, Middle (if applicable) and Surname/Family name only.
- If you have changed your name in the last 10 years please provide this as well, particularly if it conflicts with your identity documents.
- Please indicate your gender and height as this will assist in identifying you on the CCTV footage.
- Your place of birth may be required by the police during any enquiries they may need to undertake.
- Please give your home address and any other addresses you have lived at in the last 3 years. Please note that we will be unable to deal with this request without a valid address.
 - If you do not have a permanent address we may be able to process this request but each such request will be dealt with on an individual basis to ensure that we are complying with GDPR.
 - In this event you will need to visit the Council Offices during business hours to discuss this matter with the Data Controller.
- Please provide your telephone number and email address in order that we may contact you should we have any queries that need answering to enable us to validate this request. Also please indicate your preferred method of contact.

Section 2: Are You The Data Subject?

- If you need help as the Data Subject you can ask someone else to act on your behalf.
 - If you are the Data Subject tick Yes and move to Section 4
 - If you are acting on behalf of the Data Subject tick No and complete Section 3 using the guidance notes for Section 1.

Section 4: Proof of Identity

- We are UNABLE to process this request without confirming your identity as we would be in breach of General Data Protection Regulations. Please DO NOT send original documents although you may bring them to the council offices if you wish.
 - If someone is making this request on your behalf, we need proof of their identity for the same reason.
- Please provide one piece of identification from List A which must be Photo ID and clearly show an identifiable photograph taken within the last 10 years.
 - If your Photo ID does not adequately identify you, please supply a recent full face colour photograph of the Data Subject in addition to the piece of identification from List A.
- Please provide one piece from List B which is to identify your current address.
- If you DO NOT have Photo ID we may be able to process this request but each such request will be dealt with on an individual basis to ensure that we are complying with GDPR.
 - In this event you will need to visit the Council Offices during business hours to discuss this matter with the Data Controller.

Section 5: Details of the Data required

- Please tell us what data you require so we may search the CCTV footage to identify what you are requesting.
- Please tell us why you want the data so we may assess the validity of your request. Examples may be as follows:
 - You tripped and fell and wish to use the CCTV footage as proof of this.
 - You need to prove you were in a particular place at a stated time.
 - You need to contest a parking ticket.
- There are reasons that you CANNOT request CCTV Data and under these circumstances your request will be denied. If we deny your request for CCTV Data, we will tell you this in writing. Some of the reasons we will deny your request are as follows:
 - You have been assaulted and want evidence of this.
 - You cannot request this data to conduct your own investigation. In this instance you must contact the police who are authorised to request CCTV Data for the prosecution of crime.

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- It would be possible to supply the footage BUT we will need to redact the identifiable images of the 3rd persons in the footage to comply with the GDPR.
- You want to see if your employee was at work on time.
 - You have no rights to see other people's CCTV Data as defined by the GDPR.
- My car was damaged whilst parked and I want to see who did it.
 - The person who damaged your car also has rights under the GDPR and therefore we cannot supply that CCTV Data.
- Disclosure of the CCTV Data may be prejudicial to an ongoing police investigation and disclosure of the CCTV Data may interfere with that investigation.
- Please note that the above are examples only and each Data Subject Access Request will be dealt with on a case-by-case basis.
- Please supply the date and time of the incident you require CCTV Data on.
 - If you are unable to supply this information, we will be UNABLE to proceed with this request as it is not possible to watch all footage on the system recorders. This would be an example of an unreasonable request.
 - The CCTV system operated by Market Weighton Town Council has a **Data Retention Policy that securely deletes CCTV Data older than 31 days**. If we do not **receive** a validated request within this time period, we will be UNABLE to continue this Subject Data Access Request as the data will no longer exist.
- Please supply the place of the incident you are enquiring about as without this we will not be able to process this request. The more accurate you are in supplying the location the better chance there is of helping you. Methods of supplying location include:
 - An address including the street number, street name and Post Code.
 - National Grid Coordinates.
 - A screen print from an online map service with a suitably positioned and identified marker.
 - A map showing the location.
 - The What3Words website <http://what3words.com> or Smart PhoneApp
- If a vehicle is involved in the incident, please give as much information about that vehicle as possible. ○ We are only able to supply CCTV Data on a vehicle owned by the Data Subject detailed in Section 1. In this instance we will need a copy of your VC5 Vehicle Registration Document which MUST show it being registered at your home address and yourself as the registered keeper.

Section 6: Declaration

- You or your representative MUST sign and date the Subject Data Access Request or we will not be able to process your request.
- **A person who impersonates or attempts to impersonate another may be guilty of an offence.**
- If you need any further assistance in completing this form, please call Market Weighton Town Council on 01430 871430 or email town.clerk@marketweightontowncouncil.gov.uk