SUBJECT ACCESS REQUEST FORM

(GDPR)

Contact Details (in block capitals):

Name		
Address		
Eircode		
Contact Phone Number.		
Contact Email.		
Any additional identifier that may assist(e.g. MPRN)		
Time Frame, from – to: (If relevant.)		
Nature of Data Required.		
Are you the Data Subject?		
I am the Data Subject and enclose evidence of my identity.		\square
E.g. photocopy of driving licence, birth certificate, passport	t etc. *	
I am not the Data Subject, but I am acting on their behalf a		\square
I have written authority, which I enclose and evidence of th	neir identity. *	
* Evidence will not be retained or filed once the request is concerned by the provided of t	omplete it will be destroyed.	
I declare that all the details I have provided in this Form are true and co	omplete to the best of my knowledge.	
Signature of Requester:	Date:	
Please return the completed Form by post to:		
Safe Energy Ireland PO Box 13560		
Galway	SAFE	
Or by e-mail to:	SAFE	
<u>dpoqueries@safeelectric.ie</u>		
	Registered Electrical Contractor	

* In order to respond to your request for personal data, you will need to provide us with adequate Proof of Identity.

Further information on Data Protection:

- The website of the Data Protection Commissioner <u>www.dataprotection.ie</u> or
- Make contact with the Office of the Data Protection Commissioner by phone on Tel. +353 57 8684800 or by email at: info@dataprotection.ie.