



### General Data Protection Regulation – Subject Access Request Form

The General Data Protection Regulation (GDPR) provides you, the data subject, with a right to receive a copy of the data/information we hold about you or to authorise someone to act on your behalf. Please complete this form if you wish to see your data. You will also need to provide proof of your identity. Your request will be processed within 30 calendar days upon receipt of a fully completed form and proof of identity.

#### Proof of identity:

We require proof of your identity before we can disclose personal data. Proof of your identity should include a copy of two documents such as your birth certificate, passport, driving licence, official letter addressed to you at your address e.g. bank statement, recent utilities bill or council tax bill. The documents should include your name, date of birth and current address. If you have changed your name, please supply relevant documents evidencing the change.

#### Section 1

Please fill in your details (the data subject). If you are not the data subject and you are applying on behalf of someone else, please fill in the details of the data subject below and not your own.

|                              |                             |                              |                             |                               |              |
|------------------------------|-----------------------------|------------------------------|-----------------------------|-------------------------------|--------------|
| Title:                       | Mr <input type="checkbox"/> | Mrs <input type="checkbox"/> | Ms <input type="checkbox"/> | Miss <input type="checkbox"/> | Other: _____ |
| Surname/Family Name:         |                             |                              |                             |                               |              |
| First Name(s)/Forenames:     |                             |                              |                             |                               |              |
| Date of Birth:               |                             |                              |                             |                               |              |
| Address:                     |                             |                              |                             |                               |              |
| Postcode:                    |                             |                              |                             |                               |              |
| Previous Address:            |                             |                              |                             |                               |              |
| Postcode:                    |                             |                              |                             |                               |              |
| Daytime Telephone Number(s): |                             |                              |                             |                               |              |

|   |
|---|
| I am enclosing the following copies as proof of identity:   |
| Birth certificate <input type="checkbox"/> Driving Licence <input type="checkbox"/> Passport <input type="checkbox"/> An official letter to my address <input type="checkbox"/> |
| If none of these are available, please contact the Money and Pensions Service - 020 7943 0500   |



**Money &  
Pensions  
Service**

### **Personal Information**

If you only want to know what information is held in specific records, please indicate in the box below. Please tell us if you know in which capacity the information is being held, together with any names or dates you may have. If you do not know the current name of the Team just tell us what you do know. If you do not know exact dates, please give the year(s) that you think may be relevant.

Employment records

If you are now or have been employed by the Money and Pensions Service\* (including previous organisations such as: Money Advice Service, Pensionwise or The Pensions Advisory Service/TPAS) and are seeking personal information in relation to your employment please provide details of your Staff number/Dates of employment.



**Section 2**

Please complete this section of the form with your details if you are acting on behalf of someone else (i.e. the data subject). If you are NOT the data subject, but an agent appointed on their behalf, you will need to provide evidence of your identity as well as that of the data subject and proof of your right to act on their behalf.

|                              |                             |                              |                             |                               |              |
|------------------------------|-----------------------------|------------------------------|-----------------------------|-------------------------------|--------------|
| Title:                       | Mr <input type="checkbox"/> | Mrs <input type="checkbox"/> | Ms <input type="checkbox"/> | Miss <input type="checkbox"/> | Other: _____ |
| Surname/Family Name:         |                             |                              |                             |                               |              |
| First Name(s)/Forenames:     |                             |                              |                             |                               |              |
| Date of Birth:               |                             |                              |                             |                               |              |
| Address:                     |                             |                              |                             |                               |              |
| Postcode:                    |                             |                              |                             |                               |              |
| Previous Address:            |                             |                              |                             |                               |              |
| Postcode:                    |                             |                              |                             |                               |              |
| Daytime Telephone Number(s): |                             |                              |                             |                               |              |

|   |
|---|
| I am enclosing the following copies as proof of identity:   |
| Birth certificate <input type="checkbox"/> Driving Licence <input type="checkbox"/> Passport <input type="checkbox"/> An official letter to my address <input type="checkbox"/> |
| If none of these are available, please contact the Money Advice Service - 020 7943 0500   |

|   |
|---|
| What is your relationship to the data subject? (e.g. parent, carer, legal representative) |
|---|

|   |
|---|
| I am enclosing the following copy as proof of legal authorisation to act on behalf of the data subject:     |
| Letter of authority <input type="checkbox"/> Lasting or Enduring Power of Attorney <input type="checkbox"/> |
| Evidence of parental responsibility <input type="checkbox"/> Other ( <i>give details</i> ):                 |



**Data Subject Declaration:**

I certify that the information provided on this form is correct to the best of my knowledge and that I am the person to whom it relates. I understand that the Money and Pensions Service is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.

Name:

Signature

Date:

OR

**Authorised person – Declaration (if applicable):**

I confirm that I am legally authorised to act on behalf of the data subject. I understand that the Money and Pensions Service is obliged to confirm proof of identity/authority and it may be necessary to obtain further information in order to comply with this subject access request.

Name:

Signature

Date:

Warning: a person who unlawfully obtains or attempts to obtain data is guilty of a criminal offence and is liable to prosecution.

I wish to:

Receive the information in electronic format   
(some files may be too large to transmit electronically and we may have to supply in CD format)

Receive the information by post\*

Collect the information in person

View a copy of the information only

Go through the information with a member of staff

\*Please be aware that if you wish us to post the information to you, we will take every care to ensure that it is addressed correctly. However, we cannot be held liable if the information is lost in the post or incorrectly delivered or opened by someone else in your household. Loss or incorrect delivery may cause you embarrassment or harm if the information is 'sensitive'.

Please send your completed form and proof of identity to:

The Data Protection Officer, Money and Pensions Service, 5th Floor, Holborn Centre,  
120 Holborn, London, EC1N 2TD or [dpo@maps.org.uk](mailto:dpo@maps.org.uk)