**REQUEST FOR DISCLOSURE OF PERSONAL DATA**

Data Protection Act 2018 Schedule 2 Part 1 2(1)

(Crime & Taxation)

Complete this form and email to Disclosurerequests@camden.gov.uk

Please note there is no obligation on the council to disclose information under this provision.

**SECTION 1 - REQUESTER DETAILS**

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| Requester Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Organisation Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Requester Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Secure email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**SECTION 2 – DATA SUBJECT DETAILS**

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| **Detail the information being requested.** *Do not provide general categories or descriptions such as ‘all data’ or ‘social care records’.***Specify exactly what information is requested.**  |

**SECTION 3: JUSTIFICATION FOR DISCLOSURE**

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| ***The information requested is necessary for one of the following purposes***:Tick √ the appropriate box The prevention or detection of crime,  The apprehension or prosecution of offenders, or  The assessment or collection of any tax or duty or of any imposition of a similar natureProvide details:  |
| We will only consider disclosing information which is **necessary** to your case and where non-disclosure of the information sought will **prejudice the purpose given above**. Detail why the information is necessary. Vague descriptions such as ‘we have to provide full disclosure’ will not be sufficient. Please note: there is no obligation on the council to disclose information.  |
| ***State which statutory power under which you are requesting the information***: |

**SECTION 4: AUTHORISATION**

I confirm that any information disclosed to me will not be used in any way which is incompatible with this purpose.

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| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(requesting officer*) | Dated:\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_ |
| Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (authorising officer)Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Dated:\_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_ |