**REQUEST FOR DISCLOSURE OF PERSONAL DATA**

Data Protection Act 2018 Schedule 2 Part 1 5(3)

(Required by law/court order or necessary for legal proceedings)

Complete this form and email to [Disclosurerequests@camden.gov.uk](mailto: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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  & Address: (if applicable) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Post code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ***Please √ tick as appropriate***:   1. I am a private individual acting on my own behalf 2. I represent a client(s) 3. Other (please state)   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**SECTION 2 – DATA SUBJECT DETAILS**

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| **Name of the person you are seeking information about**:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ***Information being requested***: |

**SECTION 3: JUSTIFICATION FOR DISCLOSURE**

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| ***Please check your reason for application***:   1. In existing legal proceedings 2. For prospective legal proceedings 3. To obtain legal advice 4. To establish, exercise or defend a legal right   ***Please detail the proceedings, advice or legal rights that you are intending to establish, exercise or defend.*** |

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| *We will only consider disclosing information which is* ***necessary*** *to your case.*  ***Detail why the information is necessary.***  *Please note:* ***there is no obligation on the council to disclose information***. |

**SECTION 4: AUTHORISATION**

I confirm that the information requested is necessary for the purposes described in this application.

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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Dated: \_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_ |