

## **Taunton Aid in Sickness Fund**

### **Subject Access Request Form**

Taunton Aid in Sickness Fund ('TAISF') acknowledges the rights of individuals as set out in the Data Protection Act 1998 and General Data Protection Regulation 2018, and we aim to respond promptly and appropriately to any Subject Access Request received. Subject Access Requests made in other formats will also be accepted, but this form is designed to speed up the process.

This form is intended to be used by individual data subjects. If you are not the data subject, but an authorised representative, you will also need to provide your own details and proof of identity, as well as evidence of your right to act on the applicant's behalf.

TAISF will not make a charge for responding to a Subject Access Request, although if repeated requests are made we may need to recover our costs. We aim to respond within 30 days of receiving your request but may need to confirm details with you or ask further questions to establish what data we hold.

Please complete below the name and address of the person on whose behalf the Subject Access Request is being made:

Name:

Address:

Postcode:

### **Proof of Applicant's Identity**

Before we can respond to your request we need to confirm your identity. Along with this request please provide two copies of documentation which confirms your name, date of birth and current address. This can include birth certificate, passport, driving licence, bank statement, utilities or council tax bill.

### **Details of Information Required**

Please use the space below to give us details about the information you are requesting, for example by including dates and stating specific documents you require (use extra sheets if necessary). This will help us to respond to your request and provide the information you require.

Please also indicate how you wish to receive the information. This can include electronic format, hard copies by post, you will collect in person, or be shown the information at the

address below by an administrator. If you require the response by email please include your email address.

**Declaration**

The information which I have supplied in this application is correct, and I am the person to whom it relates. I understand that the Taunton Aid in Sickness Fund may need to obtain further information from me/my representative in order to comply with this request. This section should be completed by an individual with parental responsibility if the data subject is under 16.

.....  
**Signature of Applicant**

**Date:**

Please return the completed form to:  
The Clerk  
Taunton Aid in Sickness Fund  
c/o A C Mole & Sons  
Stafford House  
Blackbrook Park Avenue  
Taunton  
Somerset TA3 7HW

Or by email to: [info@tauntonaidinsicknessfund.co.uk](mailto:info@tauntonaidinsicknessfund.co.uk)