

AMBER VALLEY BOROUGH COUNCIL

DATA PROTECTION ACT 1998	
REQUEST FOR ACCESS TO PERSONAL DATA BY AGENT OF DATA SUBJECT	
DATE	OUR REF:
NAME OF REQUESTER:	
ADDRESS OF REQUESTER:	
I enclose the appropriate fee of £ to cover administrative costs.	
SIGNATURE:	DATED:
I request a copy of my own personal data held by the Council's Financial Services Department .	
SIGNATURE:	DATED:
<u>FOR OFFICE USE ONLY</u>	
PAYMENT CODE: 4184 9553	RECEIPT NO:
DATE RECEIVED:	FEE RECEIVED:
DATE PROCESSED:	AUTHORISED BY:
DATE DESPATCHED:	PROCESSED BY:
	DESPATCHED BY:
PLEASE RETURN TO: THE DATA PROTECTION OFFICER, AMBER VALLEY BOROUGH COUNCIL, FINANCIAL SERVICES DEPARTMENT, P.O. BOX 1, TOWN HALL, RIPLEY, DE5 3WZ	