Subject Data Access Request

Application for access to your personal data held by Jersey Post.

IMPORTANT NOTE: We cannot accept the document unless it is signed and accompanied by copies of proof of ID and address. There is no fee for processing Subject Data Access Requests. See page 2 for full details of acceptable identification documents.

A member of the Jersey Post team will contact you to acknowledge receipt of this request and will provide a response to you within 21 working days (however should there be any delays due to unforeseen circumstances you will be notified of this).

Fields marked with an * are mandatory and must be completed.

1. Personal Information

*Title: Mr Mrs	Miss Ms	Other	
*Forename(s)/Given name(s):			
*Surname/Family name:			
Maiden/Other names:			
*Date of birth:			
*Place of birth:			
. Contact Details			
Telephone number:			
*Current Address:			
		*Postcode:	
Alternative Correspondence: Only complete this box if you wish correspondence not to be sent to above home address.			
		*Postcode:	
If you would like someone to	act on your behalf plea	ase enclose written consent including their address.	
Previous Addresses (for the last five years): If necessary use separate sheet of paper.			



	Email address:
	Please tick this box if you would prefer general correspondence to be sent via email.
	Please note disclosure of documents will not be made by email.
3.	Your request
	help us find the personal data you require and which may be held by Jersey Post please supply as much detail as assible in the boxes below. Please continue on a separate sheet of paper if necessary.
	Specify exactly what information you require?
4.	Declaration & Signature
JS	e Information supplied in this application is correct and I am the person to whom it relates. I accept that the information will be ed for the purpose of administering this request and to ensure the accuracy of information held by Jersey Post. I understand that sey Post may ask for more information in order to complete this subject access request.
*F	Please tick the box to agree: *Date:
5.	Checklist
Ple	ease ensure you have included with the form:
	otocopy of one of the following forms of AND Photocopy of one of the following forms of photographic identification with name and current address .
	 Bank statements (dated within the previous 3 months) birth. Passport
	 Utility bill (dated within the previous 3 months) National identity card
	Valid driving licence

PLEASE DO NOT SEND ORIGINAL DOCUMENTS.

(please note if using a UK or other national driving licence, it cannot be used for both current address and date of birth identification)

PLEASE DO NOT SEND ORIGINAL DOCUMENTS.

Signed letter of authority if you require us to correspond with another person on your behalf.

Please send completed applications to:

Customer Services Department Jersey Post Headquarters Rue Des Pres Trading Estate JERSEY, JE1 1AA

Alternatively please email: customerservices@jerseypost.com

t: 616616

e: customerservices@jerseypost.com



