



### 1. Data subject details

It may be necessary for a member of the Data Protection team to contact you by telephone to verify your identity. Where this cannot be verified via security questions based on information we hold about you, we may request supporting identification documents prior to responding to this request.

<b>Forename(s):</b>		
<b>Surname:</b>		
<b>Daytime Telephone No:</b>		
<b>Email Address:</b>		
<b>What is the nature the data subject's relationship with the James Fisher Group?</b>	<input type="checkbox"/> <b>Employee (current)</b>	<input type="checkbox"/> <b>Employee (former)</b>
	<input type="checkbox"/> <b>Supplier</b>	<input type="checkbox"/> <b>Client</b>
	<input type="checkbox"/> <b>Other .....</b>	

### 2. Description of data request

<b>What is the nature of your data request?</b>	<b>A. Access</b>	<input type="checkbox"/>
	<b>B. Correction</b>	<input type="checkbox"/>
	<b>C. Restriction</b>	<input type="checkbox"/>
	<b>D. Erasure</b>	<input type="checkbox"/>
	<b>E. Objection</b>	<input type="checkbox"/>
	<b>F. Portability</b>	<input type="checkbox"/>
	<b>G. Withdrawal of consent</b>	<input type="checkbox"/>

Please use this space to give us any details about the information you are requesting, e.g. by stating specific documents or timescales:





### 3. Declaration of data subject

I certify that the information given on this request form is true. I understand that it is necessary for you to confirm my identity and it may be necessary to obtain more detailed information in order to locate the correct personal data.

**Signed** .....

**Print name** .....

**Dated** .....

### 4. Authorisation of data subject to respond to a representative acting on their behalf

If this request is being submitted by a representative on behalf of the data subject, their express consent must be obtained and provided. We may contact the data subject to verify this authority.

**I hereby give my authority for the representative named in Section 5 of this form to make this subject request on my behalf under the General Data Protection Regulations.**

**Signature of data subject:** .....

**Date:** ...../...../.....

### 5. Details of representative

<b>Name of representative:</b>	
<b>Nature of relationship to data subject:</b>	
<b>Position and company name:</b>	
<b>Email address:</b>	
<b>Telephone number:</b>	



**6. Submission of data request**

Please submit this form via email to [privacy@james-fisher.co.uk](mailto:privacy@james-fisher.co.uk) or via the post to Data Controller, James Fisher and Sons plc, PO Box 4, Barrow in Furness, Cumbria LA14 1HR.

We will normally respond to your request within a period of one calendar month. This period begins only when the identity of the data subject has been confirmed and any relevant documentation received. If it is not possible to provide the data within this timescale we will notify you as soon as possible.

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Internal use only – to be completed by a member of the Data Protection team.

Are you satisfied that the form has been completed by the data subject?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If no, confirm identity checked and verified via security questions and/or ID?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Signed</b> .....	<b>Print name</b> .....	
<b>Position</b> .....	<b>Dated</b> .....	