

REQUEST FOR DATA - DECLARATION FORM

PLEASE TREAT THIS AS PRIVATE AND CONFIDENTIAL



NOTE: Information requested is provided to you at the discretion of Southampton City Council. Therefore failure to complete all parts of this form could result in your request being rejected.

DETAILS OF THE OFFICER INVESTIGATING

Name _____

Rank _____ Number (if applicable) _____

Tel No: _____ Fax No _____

Email id: _____

Organisation _____ Station based at _____

Signed _____ Date _____

AUTHORISING OFFICER (IF APPLICABLE)

Signed _____

Print Name _____

Rank/Title _____

Date _____

**PLEASE COMPLETE EITHER SECTION ONE OR TWO AND THREE:
(PLEASE TICK APPROPRIATE BOX)**

SECTION ONE
Section 29 Data Protection Act 1998

Are you requesting the information for:

- The prevention or detection of crime
- The apprehension or prosecution of offenders
- The assessment or collection of any tax or duty

I confirm that if I do not receive this information I request that it will prejudice my investigation:

- Yes No

Please state how non release of the information will prejudice your investigation investigation:

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SECTION TWO
Section 35 Data Protection Act 1998

Yes No

Which other statutory provision are you relying on?

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SECTION THREE
Your investigation

Why is the information requested necessary to your investigation?

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DETAILS OF PERSON YOU ARE INVESTIGATING

Name

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Address

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WHAT INFORMATION IS REQUIRED?

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WHY IS THE INFORMATION REQUIRED?

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PLEASE COMPLETE AND SIGN THE FORM AND THEN RETURN TO:

Information Compliance Officer
Southampton City Council
Civic Centre
Southampton
SO14 7LT

Tel: 023 8083 2676
Fax: 023 8083 2308
Email: foi.requests@southampton.gov.uk