

Right to Erasure Request Form

Part 1 – Person that the information relates to (the individual):

*Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms Other.....
*Full name	
Former name by which you may be known to in the Society's records	
*Current Address (incl. postcode)	
Previous Address (incl. postcode)	
*Email	
*Telephone number	
*Date of Birth	
Please indicate your relationship to the Society e.g. Volunteer, Member, Trustee, Other	

To verify the individual's identity, we need to see two pieces of identification. Select one from list A and one from list B. One of these must be identification with a photo.

Please indicate which ones you are supplying.

List A	List B
<input type="checkbox"/> Driving Licence	<input type="checkbox"/> Utility Bill showing current home address (no more than 3 months old)
<input type="checkbox"/> Passport/Travel document	<input type="checkbox"/> Bank Statement or Building society Book (no more than 3 months old)
<input type="checkbox"/> Birth Certificate	

Please DO NOT send original copies in the post. Photocopies or scanned copies are acceptable and can be attached to this request or emailed to terry.cavender@buckinghamcanal.org.uk

Part 2 – Is the requested information about you (are you the individual)?

No, the information is not about me (go to part 3) Yes, the information is about me (go to part 4)

Part 3 – Person (agent) acting on behalf of the individual:

*Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms Other.....
*Full name	
Company	
*Current Address	

*Email	
*Telephone number	
What is your relationship to the individual? (e.g. parent, carer, legal representative)	
<p>Please note that we cannot provide you with the information requested unless you provide the above details. If you are acting on behalf of the individual, you must submit their written authority. Photocopies or scanned copies are acceptable and can be attached to this request or emailed to terry.cavender@buckinghamcanal.org.uk</p>	

Part 4 – Details of information being requested:

Under Article 17 of the General Data Protection Regulation the individual has the right to request the erasure of your personal data where one of the following grounds applies:

Please indicate below which ground or grounds you are relying on for your processing restriction request:

- ☐ The personal data is no longer necessary for the purpose we collected it for.
- ☐ You withdrew your consent to our processing activities and no other legal justification for processing applies

You are objecting under GDPR Article 21(1) to:

- ☐ The processing, including profiling, that is necessary for us to perform a task in the public interest or in the exercise of our official authority; and
- ☐ There are no overriding legitimate grounds to process the personal data.
- ☐ The processing, including profiling, that is necessary to pursue our or a third party's legitimate interest; and
- ☐ There are no overriding legitimate grounds to process the personal data.

You are objecting under GDPR Article 21(2) to processing for direct marketing purposes.

- ☐ We unlawfully processed your personal data.
- ☐ EU or member state law requires us to erase your personal data to comply with a legal obligation.
- ☐ We collected the personal data in the context of offering online services to children under GDPR Article 8(1).

To help us process your request quickly and efficiently, please provide as much detail about the personal data you are requesting us to erase.

We will communicate the erasure of the personal data to each recipient to whom we disclosed the personal data unless this is impossible or involves disproportionate effort.

Part 5 – Possible fee.

There is normally no fee for a right to erasure request. However, please be aware that Buckingham Canal Society is permitted to charge a reasonable fee when a request is deemed manifestly unfounded or excessive. If it is particularly repetitive or is requesting further copies of the same information. Buckingham Canal Society will notify you if it considers that a fee is payable due to the nature of your request. If a fee is required, your request will not be actioned until payment is received. Under the General Data Protection Regulation, Article 12 (5)

Part 6 – Disclosure of the information.

What is your preferred method of being contacted?

☐ Email

☐ Post

By Other (please specify)

Part 7 – Declaration.

I can confirm that the information given on this form is true. I understand that Buckingham Canal Society is obliged to confirm proof of identity/authority and that it may be necessary to obtain further information to comply with this request and that the one month period in which Buckingham Canal Society must respond to my request under the Data Protection Legislation only commences when reasonable inquiries to confirm my identity are completed. I understand that applicable law may allow Buckingham Canal Society to refuse to act on my request.

☐ Tick this box to confirm

Signed.....

Date:.....

Warning – any person who unlawfully obtains or attempts to obtain personal information is guilty of a criminal offence and is liable to prosecution.

Part 8 – Before submitting this form, please check that you have:

Enclosed proof of the identity of the individual– see part 1

Enclosed proof of authority to act on behalf of the individual (if appropriate) – see part 3

Given enough details for us to locate the information you seek – see part 4

Completed the declaration – see part 7

Completed all relevant sections of the form - (part 3 only to be completed if acting as an agent)

Please submit this form and accompanying documents to

terry.cavender@buckinghamcanal.org.uk

Or by post to: Terry Cavender, 7 Buckingham Road, Akeley, Buckingham, MK18 5HL

Right to Erasure Request Form - Office use only

Date request received		
Has the Identity been checked?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Type of document used to establish ID e.g. passport, driver’s licence	List A:	
	List B:	
Was any data erased?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Reason for not erasing data:		
Was the individual informed of the reasons for not erasing data?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Further Comments		
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Signed:		
Role		