

Subject Access Request Form – General Data Protection Regulation

Thank you for your enquiry about personal information which may be held about you on the Claims Portal. To enable a search to be made please provide the following information:

1 SURNAME

FORENAME

OTHER NAMES

MAIDEN OR ALTERNATIVE NAME

MALE

FEMALE

2 DATE OF BIRTH DAY MONTH YEAR

3 NATIONAL INSURANCE NUMBER

4 VEHICLE REGISTRATION NUMBER

5 CURRENT ADDRESS

POSTCODE

RESIDENT FROM TO

6 If not resident at current address for the last 6 years, please advise us of any previous addresses

PREVIOUS ADDRESS

POSTCODE

RESIDENT FROM TO

PREVIOUS ADDRESS

POSTCODE

RESIDENT FROM TO



- 7 Claims Portal Ltd are required to confirm your identity. In order for us to confirm your identity, please provide one form of ID confirming your name and date of birth and another to confirm your current address. (You are unable to use the same form of ID for both). Photocopies are acceptable, please do not send in originals. Please enclose one from each of the following:

Name and Date of Birth Proof	Name and Address Proof
Current photo card driving licence	Utility / TV Licence or local authority bill (Utility bill issued within the last 3 months)
Current signed passport	Current Vehicle registration document
Original Birth certificate	Mortgage / student loan statement (issued in the last year)
Official ID Card	HMRC letter (issued in the current financial year)
If you have been known by another name, please also include a copy of one of the following forms of identification.	If you have been known by another name, please also include a copy of one of the following forms of identification.
Marriage licence	Deed poll notification
Decree nisi	Decree absolute

We will always attempt to verify your identity quickly and with minimum inconvenience to you. However, if we cannot be certain that you are entitled to disclosure of the information you requested, as permitted by the General Data Protection Regulation, we will request further documentation to establish your identity.

- 8 A fee will not be chargeable for this request. However, please note that Claims Portal may be able to charge a 'reasonable fee' if a request is manifestly unfounded or excessive as permitted under the General Data Protection Regulation.
- 9 How would you like to receive your information? Email: _____ Post: _____

Claims Portal will respond within one month of receipt of this completed form.

Signature of person named in Section 1 above

Date _____

Return to: Claims Portal Support
 Linford Wood House
 6-12 Capital Drive
 Milton Keynes
 MK14 6XT

Should you have any further queries, please do not hesitate to contact us at: ClaimsPortal@mib.org.uk

