

Data Protection Subject Access Request Form



- Please complete the form and return it to the address below.
- This form may be used by individuals (data subjects) and third parties acting on behalf of a data subject, or in line with relevant legislation.
- Please remember to include copies of any identification documents to help us verify your identity along with the form.
- An electronic form is available at: <https://www.coop.co.uk/terms/privacy-notice>.

Section 1

✓	About the person making the request :
	The request is about me - Go to section 3
	I'm a police officer, insurance company, legal representative etc. Go to section 2
	I'm acting on behalf of the data subject Go to section 2

Section 2 - Third Party Details

If you are a **third-party**, please complete the section below, if the request is about you, please skip this section.

About the third-party :	
Requestor Name	
Requestor Email or Postal Address	
Requestor Telephone	
Please provide additional information about you that will help us verify that you're an authorised person to request footage. This could be your Police Collar number, professional body registration number. Please also include any case or crime reference number. Please note we will always verify your credentials with the issuing authority.	

i If you are requesting this information in a professional capacity, please send either a copy of your clients signed consent allowing us to release any footage/information that we may hold to yourself, or a DPA (Schedule 2) form.

Please note that if this is relating to a crime that we have reported to the police, this is not required.

If the information relates to someone you have caring responsibilities, please provide evidence that you are legally entitled to act on their behalf.

If you choose not to include copies of your identification, you'll need to send these to us before we can start work on your request.



Section 3 - Data Subject Details

About the data subject :	
Name	
Email or Postal Address	
Telephone	
Membership number (if applicable)	



If you provide an email address, we will email you as a primary means of communication. If you provide a postal address, we will write to you via royal mail.

If the information is about you, we will need to verify your identity. You may choose to do this by sending a clear image of your Drivers Licence or Passport so that we can identify you.

If you choose to send us your identity a different way, we will start work on your request once your identity has been verified.

Section 4 - About the Request

✓	What kind of information are you looking for?
	CCTV Footage - Go to section 5
	Colleague (including former colleague) information - Go to section 6
	Customer/Member information - Go to section 7

Section 5 - CCTV Footage



- We typically retain footage for between 7 and 28 days.
- We will only supply footage of the data subject - anything else will be redacted.

✓	What kind of footage are you looking for?
	Food store
	Funeralcare branch
	Lorry dashcam
	Colleague bodycam

✓	What kind of incident does it relate to?
	Store issue
	Vehicle incident (police/insurance companies only, unless the data subject is visible)
	Crime (police only)

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When did the incident take place?	
Date	
Time (as specific as possible)	



If you are unsure of the exact time, please indicate a time and we will search up to 30 minutes either side of this.

Where did the incident take place?	
<p><i>Please include, for example a store address.</i></p> <p><i>The more specific you can be, the greater chance we will have of locating the footage.</i></p>	

For vehicle incidents only	
Registration number if known	
Make of vehicle	
Model of vehicle	
Exact location of vehicle	

For crime incidents only	
Crime reference number	
Details/description of offence	

Section 6 - Colleague Requests

✓	What kind of information are you looking for?
<input type="checkbox"/>	HR Information
<input type="checkbox"/>	Employee Relations Information
<input type="checkbox"/>	Wage Slips/P60s etc.
<input type="checkbox"/>	Other

What date range would you like us to search?	
Date from (dd/mm/yyyy)	
Date to (dd/mm/yyyy)	

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Are there any reference numbers that would help us locate your information?
(For example, case reference numbers).

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What information are you looking for? Please be as specific as possible:

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To help us locate the colleague, please provide **at least one** of following:

Employee number	
National Insurance Number	

Section 7 - Customer/Member Requests

To help us quickly locate the information you're looking for, please tell us a little more about it. You may have interacted with multiple businesses within our Co-op, so to avoid taking an action that is not intended, we'll only look for information in the parts of our business that you ask us to.

<input checked="" type="checkbox"/>	Please select all that apply:
<input type="checkbox"/>	Co-op Food Store transaction
<input type="checkbox"/>	Co-op Food Online Shopping
<input type="checkbox"/>	Co-op Membership
<input type="checkbox"/>	Co-op Insurance
<input type="checkbox"/>	Co-op Legal Services
<input type="checkbox"/>	Co-op Funeralcare
<input type="checkbox"/>	Co-op Funeral Plans
<input type="checkbox"/>	Other (state here:)

What information are you looking for? Please be as specific as possible:

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<input checked="" type="checkbox"/>	What would you like us to do?
<input type="checkbox"/>	Provide copies of information you hold
<input type="checkbox"/>	Erase my data (where applicable)
<input type="checkbox"/>	Correct an error in my data
<input type="checkbox"/>	Stop processing my data
<input type="checkbox"/>	Something else (state here):



Please note that where you request that we erase your data, we will only be able to do this where legislation allows us to do so.

Please send completed forms, along with copies of any relevant identification or supporting documents to:

GDPR Subject Access Request Team
Co-operative Group Limited
6th Floor
1 Angel Square
Manchester
M60 0AG