

Subject Access Request Form

Request for personal data under the General Data Protection Regulation 2018

The General Data Protection Regulations (GDPR) 2018 provides you, the data subject, with a right to receive a copy of the data/information we hold about you or to authorise someone to act on your behalf. Please complete this form if you wish to see your data. You will also need to provide proof of your identity. Your request will be processed within 30 calendar days upon receipt of a fully completed form.

Proof of identity:

We require proof of your identity before we can disclose personal data. Proof of your identity should include your name, date of birth and current address. If you have changed your name, please supply relevant documents evidencing the change.

Administration fee:

Candycane Marketing's policy is not to charge for Subject Access Requests

Please note- this form is optional and not a requirement to submit a SAR.

Personal details

Title	Mr 🗖	Mrs 🗖	Miss 🗖	Other
First Name				
Last Name				
Contact Details				
Address Line 1				
Address Line 2				
Address Line 3				
Address Line 4				
Eircode				
Daytime Telephone Number				
Mobile Telephone Number				
Email Address				



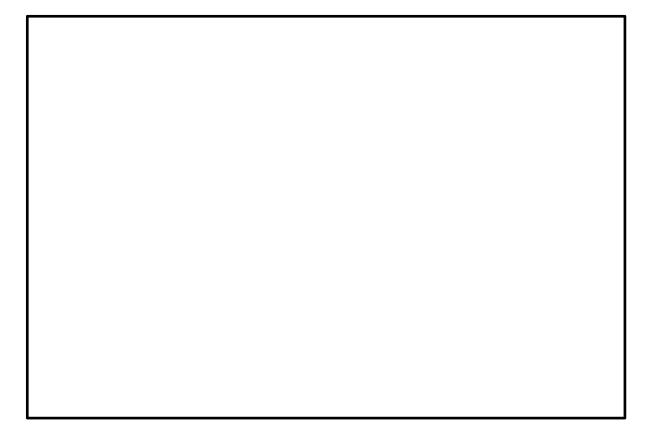
Previous Address Details (if applicable)

Address Line 1			
Address Line 2			
Address Line 3			
Address Line 4			
Eircode			
Information Require	d		
Date range of inform	ation required (if available) (DD/MM/YYYY)	From:	
		To:	

Personal Information

Please fill out the box below outlining what information you are requesting. To assist us in retrieving this information, please indicate if you know in which capacity the information is being held, names, dates and any other relevant information.

If you do not know exact dates, please give the year(s) that you think may be relevant.





Please complete this section of the form with your details if you are acting on behalf of someone else (i.e. the data subject) If you are NOT the data subject, but an agent appointed on their behalf, you will need to provide evidence of your identity as well as that of the data subject and proof of your right to act on their behalf.

Title	Mr 🗖	Mrs 🗖	Miss 🗖	Other 🗖 🛛	
First Name					
Last Name					
Contact Details					
Address Line 1					
Address Line 2					
Address Line 3					
Address Line 4					
Eircode					
Daytime Telephone Number					
Mobile Telephone Number					
Email Address					
What is your relationship to the data subject					



Data Subject Declaration:

I certify that the information provided on this form is correct to the best of my knowledge and that I am the person to whom it relates. I understand that Candycane Marketing is obliged to confirm proof of identity / authority and it may be necessary to obtain further information in order to comply with this subject access request.

Name:	
Signature:	
Date:	

Or Authorised person – Declaration (if applicable)

I confirm that I am legally authorised to act on behalf of the data subject. I understand that Candycane Marketing is obliged to confirm proof of identity / authority and it may be necessary to obtain further information in order to comply with this subject access request.

Name:	
Signature:	
Date:	

Warning:

A person who unlawfully obtains or attempts to obtain data is guilty of a criminal offence and is liable to prosecution.

I wish to

Receive the information by email	
Receive the information by post*	
Collect the information in person	
Go through the information with a member of stat	ff 🗖



*Please be aware that if you wish us to post the information to you, we will take every care to ensure that it is addressed correctly. However, we cannot be held liable if the information is lost in the post or incorrectly delivered or opened by someone else in your household. Loss or incorrect delivery may cause you embarrassment or harm if the information is 'sensitive'.

Please send your completed form to

Subject Access Request Department

Email : hello@candycanemarketing.ie