SYNECTICS SOLUTIONS
DATA SUBJECT ACCESS REQUEST FORM

Please complete this form in full to request a copy of the information we hold about you on the fraud prevention database operated by Synectics Solutions. This form may be rejected if you fail to complete all relevant (*) sections. **Please note that Synectics Solutions can only share records that match the details you have provided on this form.**

An email address and contact number must be provided if you request to receive your results electronically.

Please use **CAPITAL LETTERS** if form is handwritten

<u>Section 1: Your Details</u> (use additional sheets where necessary)

	First Name*	Middle Name	Surname*
Other Names (If applicable): (Other names you have been known by during the last 6 years e.g. maiden name. **Proof of change must be provided e.g marriage cert**			
Date of Birth: * DD/MM/YYYY			
Email Address(s) used in the last 6 years:	1. 2. 3.		
Landline Number(s) used in the last 6 years: 1. 2. 3.		Mobile Number(s) used in the last 6 years: 1. 2. 3.	
Current Address (including postcode) *:			

Previous Addresses:
(please provide your previous addresses (including postcodes) for the last 6 years)

Address:	Address:	Address:	Address:

Section 2: Proof of Identity (*Required*)

You must include **TWO** proofs of identity, **One from list A** and **One from list B.**
Please tick the appropriate box on each list to indicate which document you have included.

List A: Enclose a **CLEAR COPY of ONE** of the following documents:

☐	A valid signed passport including photograph
☐	A valid UK photo-card driving licence (full or provisional)
☐	A valid Biometric Residence Permit including Photocard (BRPs) – both sides
☐	Recent evidence of entitlement to a state or local authority funded benefit (including housing benefit and council tax benefit), tax credit, pension, educational or other grant.
☐	National Identity Card (non-UK nationals)
☐	Identity Card issued by the Electoral Office for Northern Ireland
☐	A valid (old style) Full Paper driving licene

List B: Enclose a **CLEAR COPY of ONE** of the following types of documents which must be **dated within the last 12 months**. **It must show your name, current address and company name/logo.** Other private information can be redacted should you prefer.

N.B. We reserve the right to request original documentation.

☐	Current council tax demand letter or statement (Within the current tax year)
☐	Utility bill
☐	Current bank statement or credit/debit card statement issued by a regulated financial sector firm in the UK, EU or equivalent jurisdiction)
☐	Local Council Tenancy Agreement currently in force
☐	HMRC or Department of Work and Pensions document
☐	Document from Student Loans Company
☐	Judicial document such as Notice of Hearing, Summons or Court Order
☐	Most recent mortgage statement

Section 3: Named Driver

Please let us know if you have been a Named Driver in the last 6 years on another person's insurance policy.

If 'yes' please provide us with details of the insurance policy number to ensure we can share the necessary information.

Please **acknowledge** that you have the permission of the policy holder to release these details.

We recommend that the Main policy holder, in which you were a Named Driver, submit a Data Subject Access Request.

Section 4: Results Response* Response to be issued by:

(*Please pick **ONE** option - If both are selected, we will email your response, as long as you have provided an email and mobile number; otherwise, we'll post your results):

Post ☐

Email** ☐

Please confirm the email address you would like your results to be issued to and the contact number you would like the password we provide to be sent to.

Email Address for receipt of results	Mobile Number for password

**If you have opted to receive your results by email, you are confirming that you accept responsibility for delivery of your personal data in this way. Please note, if this is a shared email address, Synectics Solutions Ltd cannot accept any responsibility or liability for 3rd party access and/or further dissemination of your personal data.

The results will be password protected and the password will be shared with your preferred contact number.

Completed forms should be emailed to **DSAR@synectics-solutions.com**

If you are unable to email your application form, please post this to the below address:

Compliance Team
Synectics Solutions Ltd
PO Box 3700
Stoke-On-Trent
ST6 9ET

Section 5: Declaration

By submitting this application, you confirm that you:

- ✓ Have read and completed all required (*) sections of this form accurately
- ✓ Have enclosed a **copy from list A**
- ✓ Have enclosed a **copy from list B**
- ✓ Are the data subject whose name and details appear on this form
- ✓ Have the permission of the policy holder to release details (where relevant)

You are also consenting to the information you provide on this form being stored and processed for the purpose of fulfilling this request.

Signed:								
Date:	D	D	M	M	Y	Y	Y	Y