



LOCHABER
HOUSING
ASSOCIATION



Lochaber Housing Association Group

Subject Access Request Form

Date Received:		*Reference Number:	
Full Signature of Receiving Officer:			
Name of Applicant:			
Any Other Names: (e.g. Maiden Name)			
Address:			
What Information is Requested? (please be precise)			
<u>Declaration by Applicant</u>			
I, _____ hereby request the above information and confirm that I am entitled to receive the information in terms of the Access to Personal Files Housing (Scotland) Act 1992 and the Data Protection Legislation (comprising the Data Protection Act 1998 (as amended) and the General Data Protection Regulation (EU) 2016/679.			
Signature:		Date:	
I confirm that I have checked that the above named person is who they say they are by checking:			
Signature of Officer:		Date:	

**This may be House/Tenant Ref, or Application Ref No.*