



DATA SUBJECT ACCESS REQUEST FORM

It is not mandatory to use this form but it will help us to give a timely and accurate response to your subject access request under Article 15 of the General Data Protection Regulation.
Please complete the table below and return the form by post or email to:

The Compliance Team
Veezu Holdings Limited
Hodge House, 114-116 St. Mary Street,
Cardiff,
CF10 1DY

compliance@veezu.co.uk

1. DETAILS OF THE PERSON ABOUT WHOM WE HOLD DATA (DATA SUBJECT)

Full Name:	
Date of Birth:	
Current Address:	
Telephone number:	
Email address:	
Date of request:	

2. ARE YOU THE PERSON NAMED IN 1. ABOVE?

Yes ☐

If yes, please provide evidence of your identity:

Driving Licence
Passport
Birth Certificate
Council Tax Bill
Utility Bill

Please answer question 4 next.

No ☐

If no, you must provide written evidence that

You have the Data Subject's authority to ask for
The information on their behalf e.g. a letter
Written by them, evidence of Power of Attorney etc.

Please answer question 3 next.



3. IF YOU ARE NOT THE PERSON ABOUT WHOM WE HOLD DATA PLEASE COMPLETE THE FOLLOWING

Full Name:	
Date of Birth:	
Current Address:	
Telephone number:	
Email address:	
Date of request:	
What is your relationship to the data subject:	
PLEASE PROVIDE EVIDENCE OF YOUR IDENTITY AND THE IDENTITY OF THE DATA SUBJECT	

4. PLEASE DESCRIBE THE INFORMATION YOU ARE SEEKING

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5. DECLARATION – TO BE SIGNED BY ALL APPLICANTS

I certify that the information I have given on this form is true. I understand that Veezu needs to be satisfied about my identity. I also understand that Veezu may need to ask me more details in order to locate the information I am seeking.

Print Name _____

Signature _____

Date _____ / _____ / _____

We must respond to your request within 30 days

6. RETURN THE FORM

Please return to the form together with evidence of your identity to: Compliance, Veezu, Hodge House, 114-116 St. Mary Street, Cardiff, CF10 1DY or via compliance@veezu.co.uk