

DATA SUBJECT ACCESS REQUEST

DATA SUBJECT AND CONTACT INFORMATION

Please provide your details in the space provided below. If you are making this request on the data subject's behalf, you should provide your name and contact information in Section.

We will only use the information you provide on this form to identify you and the personal data you are requesting access to, and to respond to your request.

First and last name:	
Any other names that you have been known by (including nicknames):	
Home address:	
Date of birth:	
Telephone number:	
E-mail address:	
If you are a current or former employee of Motorpoint, please provide your employee identification number and your approximate dates of employment:	
Please provide sufficient information to help us locate your personal data.	

SIGNATURE AND ACKNOWLEDGEMENT

I, _____, confirm that the information provided on this form is correct and that I am the person whose name appears on this form.

I understand that:

1. Motorpoint must confirm proof of identity and may need to contact me again for further information
2. My request will not be valid until Motorpoint receives all of the required information to process the request;
3. I am entitled to one free copy of the personal data I have requested, and acknowledge that for any further copies I request, Motorpoint may charge a reasonable fee based on administrative costs.

If you would like to receive a copy of the personal data you are requesting access to, please indicate below whether you would like a hard copy or an electronic copy:

☐

Hard copy

☐

Electronic copy

REQUESTS MADE ON A DATA SUBJECT'S BEHALF

Please complete this section of the form with your name and contact details if you are acting on the data subject's behalf.

First and last name:	
Home address:	
Date of birth:	
Telephone number:	
E-mail address:	

CONSENT OF DATA SUBJECT AND ACKNOWLEDGEMENT

I, _____, confirm that the information provided on this form is correct and that I have authorised _____ to act on my behalf.

AUTHORISED PERSON SIGNATURE

I, _____, confirm that I am authorised to act on behalf of the data subject. I understand that Motorpoint must confirm my identity and my legal authority to act on the data subject's behalf, and may need to request additional verifying information.

Signature

Please submit your request:

- In writing to our head office Customer Care Team, Shelton House, Unit 7, Primepark Way, Derby, DE1 3QB;
or
- By email to DPO@motorpoint.co.uk.