RESTRICTED when complete (amend if required)

Request for Personal Information – Part 1

т	n	•		

Organisation:	
Name & Job Title/Rank:	
Contact address/details:	
From:	
Organisation:	
Name & Job Title/Rank:	
Contact address/details:	
Project ref:	
I am a Designated/Primar	v Designated Officer for the purposes of the Operational Information
Sharing Protocol for Crime	y Designated Officer for the purposes of the Operational Information & Disorder for Kent & Medway. In accordance with the Protocol I ion or sensitive personal information about:
Sharing Protocol for Crime	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information Surname:	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information Surname: All previous surnames:	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information Surname: All previous surnames: Also known as:	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the sequence of the	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the surname: All previous surnames: Also known as: Forenames: Place of birth:	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the sequence of the	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the sequence of the	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the request previous surnames: Also known as: Forenames: Place of birth: Date of birth: Full present address:	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the req	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the request previous surnames: Also known as: Forenames: Place of birth: Date of birth: Full present address:	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the req	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the req	& Disorder for Kent & Medway. In accordance with the Protocol I
Sharing Protocol for Crime request personal information of the req	& Disorder for Kent & Medway. In accordance with the Protocol I

Only the minimum amount of information to meet the requirement of the request should be disclosed and it will only be used for the purpose specified. The recipient will not release the information to any third party without obtaining the express written authority of the partner who provided the information.

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The subject of this request has given their consent, which is attached. Where this has not been obtained the specific statutory power, obligation or DPA exemption is set out here. The making of an unjustifiable request could constitute a criminal offence. Evidence must be provided to substantiate any disclosure being made where a public interest test is required and the public interest to disclosure is considered to outweigh the interest to maintain a duty of confidence.							
	at the personal or sensitive information is	required for th	ne following purpose and				
with the foll	owing justification:						
Please use of	continuation sheet, if required.						
The informa	ition I require is:						
	·						
Please use continuation sheet, if required.							
Failure to disclose the information will have the following impact:							
		5 1					
Please use continuation sheet, if required.							
I confirm, that in accordance with S29 of the Data Protection Act the subject will not be informed of this disclosure, because to do so is likely to prejudice the prevention or detection of crime or the prosecution or apprehension of offenders (delete this paragraph where this is not relevant and the subject has been advised of the planned disclosure).							
Signed:		Date:					
Jigiticu.		Date.					

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Request for Personal Information – Part 2 Confirmation of Disclosure

То:												
Organisation	n:											
Name & Job												
Contact add	ress/details:											
Project Refe	rence:											
From:												
Organisation	n:											
Name & Job												
Contact add	ress/details:											
Project Refe	rence:											
		II.										
	pecific inform		to be	disclos	sed is	listed	here (not	the ir	nformat	tion its	self wl	hich
	to be disclos											
Please use of	ontinuation s	sheet,	if req	uired.								
above may b	nt full consider e disclosed. The equest and mority.	his info	ormati	ion is _l	provid	ded to	you solely	y for ti	he purp	ose s	et out	
Signed:							Date:					