



# Warwickshire Retail Crime Initiative

*Working in partnership to prevent and reduce crime and anti-social behaviour in retail and licensed business premises in Warwickshire*

Member of National Association of Business Crime Partnerships and National Business Crime Solutions - Accredited by Secured by Design

[www.wrci.org.uk](http://www.wrci.org.uk)

## Subject access - Application form notes

To be completed by the person requesting information

Please read the following notes before completing your application:

1. All sections must be completed using the original form and not a photocopy.
2. Please print clearly using block letters.

We have a duty to ensure that information we hold is not disclosed to an unauthorised person and it is important to confirm that you are who you say you are. Failure to provide this proof of identity may delay your application.

If we require any further proof of identity from you, we will inform you.

### Section 1: Information about yourself:

Please complete all parts of this section, including previous addresses. If you think you may be known to us by another name (e.g. previous married name, name changed by deed poll) please let us know.

### Section 2: Proof of identity:

Please provide evidence of your identity by enclosing a copy of an official document which shows your name and date of birth, such as a birth certificate, driving licence or current passport. A copy of a document with a current photograph of you, such as a passport or driving licence. Please enclose evidence of your address by enclosing a copy of an official document which shows your current address, such as a utility bill issued within the past six months.

### Section 3: the declaration must be signed by you.

When you have completed and checked this form, **post** it together with copies of the required documents by **'signed for' post** to: Warwickshire Retail Crime Initiative, Safer Neighbourhood Team, Rugby Police Station, Newbold Road, Rugby, Warwickshire CV21 2DH, OR by email. See below.

Email is less secure, but if you wish, you can send the application and proof of identity to **[dataprotection@wrci.org.uk](mailto:dataprotection@wrci.org.uk)**

If you have any queries regarding this form, or your application, please contact: **[dataprotection@wrci.org.uk](mailto:dataprotection@wrci.org.uk)**

### Information

We will provide you with following details if we have them recorded:

Name, date of birth, address, date and details of incident. We do not have to supply copies of the initial incident report. This will be sent to you by signed for post.



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## Subject access - Application Form

### Section 1: Information about yourself:

Title (Mr, Mrs, Ms, Miss, Other) .....

Surname/ Previous surname.....

All forenames.....

Gender..... Date of birth.....

Current home address with post code (to which we will reply).....

.....

.....

Contact telephone Number.....

If you have lived at the above address for less than 3 years, please give previous addresses for that period below:  
(Continue previous addresses on a separate sheet if necessary)

Previous Address(es).....

Postcode..... Dates of residency: From:..... To:.....

### Section 2: Proof of Identity:

Make sure you have enclosed the required items of identification (see application form notes).

### Section 3: Declaration: to be signed by the applicant.

The information which I have supplied in this application is correct and I am the person to whom it relates.

Signature.....Date.....

### Before returning this form please check:

- Have you completed all the sections?
- Have you enclosed copies of all the required documents?
- Have you signed and dated the forms?