

Subject Access Request Form

Your Details

Title:	
Forename(s):	
Surname:	
Address:	
Telephone Number:	
Email Address:	

Information Being Requested

Please provide specific details (along with any relevant dates) of the information being requested and any additional information that may help us to locate your personal data and to confirm your identity.

By completing this form, you are making a subject access request under the GDPR for personal data collected, processed, and held about you by us that you are entitled to receive.

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Declaration

By signing below, **you confirm that you are the data subject named in this Subject Access Request Form.** You warrant that you are the individual named and will fully indemnify Dreamscape Design Ltd for all losses and expenses incurred if you are not. We cannot accept requests in respect of your personal data from anyone else, including members of your family.

Name:	
Signature:	
Date:	

Please send this form to the following postal address:

Mr Neville Langston,
Dreamscape Design Ltd,
86-90 Paul Street,
London
EC2A 4NE