DPG16 – Data Rectification Request



DATA RECTIFICATION REQUEST FORM

You have the right to have your personal information rectified in certain circumstances, under the Data Protection Act 1998 (DPA) and under the EU General Data Protection Regulation 2018 (GDPR), we ask that you complete this form so we can determine the details of your request and, where applicable, implement your request.

If your request is valid, we will rectify the information requested, unless we are required by law to keep it - in this case we will advise you of what we are keeping, and the reasons why.

Please complete your details below and sign where indicated. Send the completed form and proof of identity (by way of proof of your name, postal address and email address) to: GDPR Requests, The Connacht Hotel, Dublin Road, Galway, Ireland

SECTION 1: Details of the person requesting information.

Full name:			
Address:			
Contact telephone			
number:			
Email address:			
	ox and read the instructions which follow it. ect. I enclose proof of my identity (see below).		
(please go to section 4)			
<u> </u>	nalf of the data subject. I have enclosed the data subject's of the data subject's identity and my own identity (see below).		
(please	go to section 3)		
with proof of your identity ar	ata relating to the right person we require you to provide us and of your address. Please supply us with a photocopy or the originals) of one of both of the following:		

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1) Proof of Identity Passport, photo driving licence, national identity card, birth certificate.

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2) Proof of Address Utility bill, bank statement, credit card statement (no more than 3 months old); current driving licence; current TV licence; local authority tax bill, HMRC tax document (no more than 1 year old).

If we are not satisfied you are who you claim to be, we reserve the right to refuse to grant your request.

SECTION 3 Details of the data subject (if different from section 1)

Full name:			
Address:			
Contact telephone			
number:			
Email address:			
lease note that you must provid	de your ow	n contact details and y	ou must provide proof of your
entitlement to act on the data su	ıbject's bel	nalf.	
SECTION 4			
	fallowing i	oformation as you can	
Please complete as much of the	ioliowilig ii		
Personal Information Currently deleted	y on File to	be Reason why to be rectified	hat personal information should
e.g. name, mobile number, email address		e.g. is the info date?	rmation inaccurate or out of
	nond to vo	 uwithin 1 calendar mo	nth of the receipt of your request
			ime may be extended to 3 months
when necessary, taking into acco			
Signature			
Date			
			
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