



LINCOLNSHIRE POLICE

**APPLICATION UNDER SECTION 29 (3)
OF THE DATA PROTECTION ACT 1998**

To be used when requesting from Public Sector partners, such as NHS and County Council

Concerned with: **(A) The Prevention or Detection of Crime**
(B) The Apprehension or Prosecution of Offenders

YOUR DETAILS	
Name	Signature
Position	
Address information to be sent to:	
Reference Number <i>(relevant to the case)</i>	
E-mail	Telephone
A signature, or co-signature of a senior person within your organisation is required for your request to be considered e.g. The Police Force – Inspector or above	
Name	Signature
Position	
Telephone	

ENTER SUBJECT DETAILS BELOW	
Full Name	
Male/Female	Date of Birth
Last known address	
Any known alias/other information which may assist	
Reply Required by (Date)	
Information Requested and the time period required	

NATURE OF ENQUIRY
Please indicate what status the person concerned has to the investigation and further information you feel may help in the decision to release the documents requested

GUIDANCE NOTES

The form should be filled in by requestor and at no time must the opinion of the Trust employee be sought.

- ✓ The requestor of the information must be relating to either:
 - (A) THE PREVENTION OR DETECTION OF CRIME
 - (B) THE APPREHENSION OR PROSECUTION OF OFFENDERS
- ✓ Please provide your full details and those of the co-signatory.
- ✓ Please include the relevant Crime/Investigation number associated to it.
- ✓ Please include as much information as you can in the Subject Details, including the time frame you require the information within and the specific information you need (such as A&E notes dated 2012-2013.)
- ✓ The Form must be signed off by a senior person within your organisation; this is required for your request to be considered
- ✓ e.g. The Police Force – Inspector or above.

UNDER NO CIRCUMSTANCES MUST THIS FORM BE USED AS A GENERAL REQUEST OF INFORMATION

