

Strictly Private & Confidential (when completed)

Data Protection Act 2018

Reference No: DSAR/IFB/

Thank you for your enquiry about personal information which may be held about you by the Insurance Fraud Bureau (IFB). Complete the below form to request any insurance fraud data or intelligence information the IFB may hold on you.

SURNAME																
FORENAME																
OTHER FORNAMES																
ALTERNATIVE SURNAME																
GENDER	MALE	FI	EMALE		UNS	PECI	FIEI	D								
DATE OF BIRTH DD/MM/YYYY			/		/											
CURRENT ADDRE	ESS															
POST CODE				_												
RESIDENT FROM	M				_TO									_		
If you have lived a addresses.	at this addre	ss for le	ss than	six ye	ars, pl	ease	adv	rise	of a	ny p	orev	vious	6			
PREVIOUS ADD	RESS															
POST CODE																_
IFB Data Subject	Access Rec	uest											Pag	ge 1	of 3	3

IFB Data Subject Access Request



RESIDENT FROM	TO	
PREVIOUS ADDRESS		
POST CODE		
RESIDENT FROM	ТО	

The IFB is required to confirm your identity. Please enclose two of the following:

Proof of identity

In order for us to confirm your identity, please provide one form of ID confirming your name and date of birth and another to confirm your address (You are unable to use one form of ID for both). Tick one in each column as appropriate. Photocopies are acceptable, please do not send in originals.

Name and Date of Birth Proof		Name and Address Proof					
Current photo card driving licence		Utility / TV Licence or local authority bill (Utility bill issued within the last 3 months)					
Current signed passport		Vehicle registration document					
Original Birth certificate		Mortgage / student loan statement (issued in the last year)					
Official ID Card		HMRC letter (issued in the current financial year)					
If you have been known by another name, please also include a copy of one of the following forms of identification. Tick as appropriate.							

Marriage licence	Deed poll notification	
Decree nisi	Decree absolute	

We will always attempt to verify your identity quickly and with minimum inconvenience to you. However, if we cannot be certain that you are entitled to disclosure of the information you requested, as permitted by the Data Protection Act, we will request further documentation to establish your identity.

It is our intention to respond to all requests **within one month** of a valid request being submitted. We may extend the response timeframe by a further two months if the request is considered complex. The intention to extend will be communicated within one month of receipt of the request.

IFB Data Subject Access Request



Signature of person named in Section 1 above

DATE _____

RETURN TO IFB DSARs Linford Wood House 6-12 Capital Drive Milton Keynes MK14 6XT Or: dsars@insurancefraudbureau.org

Should you have any further queries, please do not hesitate to contact us.

HOW WOULD LIKE US TO RESPOND?

BY EMAIL

BY POST