

Data Protection Complaint Form

Your details

Your name	
Preferred contact method	<input type="checkbox"/> Email <input type="checkbox"/> Phone <input type="checkbox"/> Post
Email	
Phone	
Postal address (optional)	

Are you complaining on behalf of someone else?

No Yes (if yes, please complete the section below)

Name of person you are complaining for	
Your relationship to them	
Do you have authority to act for them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure
Evidence of authority (if needed)	<input type="checkbox"/> Written consent <input type="checkbox"/> Other:

What is your complaint about? (tick all that apply)

- Access to information / Subject Access Request (SAR)
- Sharing information with someone else
- Keeping information secure (possible data breach)
- Inaccurate information / request to correct information
- Keeping information too long / deleting information
- Using information unfairly or without a clear reason
- CCTV / photos / video / biometric data

Other (please explain): _____

What happened?

Please describe what you think went wrong. Include dates, times, and names where you can.

Summary of the issue:

When did this happen (date(s))?

Where did it happen?

Who was involved (names/roles if known)?

What personal information do you think is involved (if known)?

What have you done so far?

Have you already contacted the Company about this? No Yes

If yes, please include who you contacted, how, when, and what response you received (if any).

G. What outcome would you like?

- An explanation of what happened
- Correction of my / who I'm acting on behalf of information
- Deletion of information (where appropriate)
- Restriction on how information is used/shared
- An apology
- Changes to processes to prevent it happening again
- Confirmation of what action has been taken
- Other: _____

Details of the outcome you are seeking:

Supporting evidence (optional)

You can attach copies of relevant documents (please do not send original documents).

- Emails/letters
- Screenshots
- SAR request/response
- Other: _____

List of attachments (if any):

- 1) _____
- 2) _____
- 3) _____

Declaration

- I confirm that the information in this complaint is true to the best of my knowledge.

Name	
Signature (if printing)	
Date	

How to send this form

Send this form by email or post to:

Matt Painter

Email: matt.painter@katem.co.uk

Post: The Henderson Building
Bowburn North Industrial Estate
Co. Durham, DH6 5NG

Phone (if you need help):
01388810999

What happens next

We will acknowledge your complaint within 30 days and investigate it without undue delay. You also have the right to complain to the Information Commissioner's Office (ICO).