

REQUEST FORM PERSONAL DATA ACCESS	Applies to:	☐ Community Hospital ☐ Chronic Sick Unit ☐ Nursing Home ☐ Centre/Home-Based Services ☐ Corporate Office		
I. APPLICATION TO ACCESS PERSONAL DATA				
Under the Personal Data Protection Act 2012 ("PDPA"), you are entitled to request for your personal data that we have, and request to know how your personal data has been used or disclosed over the past year. Please complete this form and submit it via: <table border="0" style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> In person or by post: Business Office Ren Ci Hospital 71 Irrawaddy Road Singapore 329562 </td> <td style="width: 50%; vertical-align: top;"> Alternatively, you can email the completed form to us: dpo@renci.org.sg </td> </tr> </table>			In person or by post: Business Office Ren Ci Hospital 71 Irrawaddy Road Singapore 329562	Alternatively, you can email the completed form to us: dpo@renci.org.sg
In person or by post: Business Office Ren Ci Hospital 71 Irrawaddy Road Singapore 329562	Alternatively, you can email the completed form to us: dpo@renci.org.sg			
II. PARTICULARS OF REQUESTOR				
Name of requestor:				
Contact number:	Email address:			
Please check the applicable box(es): ☐ I am making an access request for my own personal data ☐ I am making an access request on behalf of other individual(s)				
Please complete this section if you are making an access request on behalf of other individual(s)				
Name of other individual(s) whom you are making an access request on behalf of:				
Contact number:	Email address:			
III. DESCRIPTION OF THE PERSONAL DATA REQUESTED				
To enable us to process your access request quickly and efficiently, please provide us with as much information as possible about the personal data you are requesting access to (e.g., type of personal data, date, time).				

IV. DECLARATION

By submitting this form, I confirm that the information stated above is true, complete and accurate to the best of my knowledge and belief.

Name & Signature	Date (DD/MM/YYYY)
--	---

Important Points to Note

Proof of Identity

Upon receiving your completed Personal Data Access - Request Form, we may require further identification or documentation to verify your identity before processing your request.

Fees

We may charge a service fee for processing each request. However, we will advise you of the amount you have to pay before we process your request.

Timeline of Processing

Having received and verified your identification and documentation, we shall endeavor to respond to your request within thirty (30) days. In the event we need more time to verify and fulfil the request, we shall inform you of the additional time needed via the contact information you provided in this Personal Data Access - Request Form.

Denial of Access Request

Ren Ci Hospital is not obliged to fulfill access requests relating to the following under the Personal Data Protection Act, such as:

- Opinion data kept solely for an evaluative purpose;
- Documents related to a prosecution if all proceedings related to the prosecution have not been completed;
- Personal data which is subject to legal privilege;
- Personal data which, if disclosed, would reveal confidential commercial information that could, in the opinion of a reasonable person, harm the competitive position of the organisation;
- Personal data collected, used or disclosed without consent, for the purposes of an investigation if the investigation and associated proceedings and appeals have not been completed;
- Any request that would unreasonably interfere with our operations because of the repetitious or systematic nature of the request;
- Any request where the burden or expense of providing access would be unreasonable to us or disproportionate to your interests;
- Any request for information that does not exist or cannot be found;
- Any request for information that is trivial, or frivolous, or vexatious.

FOR OFFICIAL USE ONLY :

Received By:	Signature	Date
Verified By:	Signature	Date
Remarks:		