



**Part 4- Declaration by Requestor**

I declare that, to the best of my knowledge, the information I have provided on this form is correct

Signature: \_\_\_\_\_

Name (block capitals): \_\_\_\_\_

Date: \_\_\_\_\_

**Please return your completed form, along with accompanying documentation to:**

Data Protection Officer

Meath County Council

Buvida House,

Dublin Road,

Navan,

Co Meath,

C15 Y291

Telephone: 046-9097000

Email: [dataprotection@meathcoco.ie](mailto:dataprotection@meathcoco.ie)

*The personal information (data) collected on this form, including any attachments, (which may include the collection of sensitive personal data) is collected for the purpose of processing this application and any data collected is subject to Meath County Council's privacy statement which can be found at <http://www.meath.ie/Data Protection/>*