

LOG DATA REQUEST

Social Services and Health Care Division

Customer information	Last name		First names	
	Personal identity code		Telephone number	
	Address and postal code			E-mail address
Information concerning the request	The period the request pertains to			
	The service(s) offered by the Social Services and Health Care Division that the request pertains to. E.g. child welfare, substance abuse services, psychiatry, health care, oral health care.			
	Other pertinent information			
Please provide the information in the following manner	 by mail to the address above by e-mail (confidential information will be sent via secure e-mail) 			
Date and signature of the person requesting the documents	Place and date Signature and name in block capitals of the person requesting the documents			
ldentity verified (completed by recipient)	 official ID card passport driving license Kela card with image student card with image residence permit card with image identity otherwise verified (when the person is known/familiar) 			
Recipient information	Reception date Recipient e-mail addr	ess	Recipient name	

Exercising your right to access is free of charge. You can check log data concerning a time period of up to the past two years, if there are no special grounds for a longer period of retention specified by law.

You should attach an itemised written authorisation or permission from the person whose information the request pertains to, to the request. If the person making the request is a legal representative, e.g. a guardian or appointed trustee, an account of this must be provided upon request.

The recipient of the information may not use or assign the information to be used for any other purpose. Breaking this confidentiality obligation is punishable on the grounds of criminal law.

The completed and signed form must be delivered to the City of Helsinki Registrar's Office or the Social Services and Health Care Division office in person.