

(Application for compensation for members of An Garda Síochána only, malicious injuries on duty)

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**GARDA SÍOCHÁNA (COMPENSATION) ACTS, 1941 AND 1945**

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**FORM OF APPLICATION FOR COMPENSATION  
IN RESPECT OF PERSONAL INJURIES NOT CAUSING DEATH**

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1. Name of Applicant .....

2. Rank of applicant and LONG NUMBER  
.....

3. Date of retirement of applicant (if no longer a serving member Garda Síochána):  
.....

4. Postal and Email Address for applicant /Solicitor for applicant  
.....  
.....

5. Date on which the injuries were inflicted [only one incident date per application].  
.....

6. \*Particulars of the injuries and treatment provided:  
.....  
.....  
.....

7. \*The duty (if any) on which the applicant was engaged when the injuries were inflicted  
[Please confirm if applicant was on duty involving special risk- this will need to be confirmed by  
the relevant Inspector]  
.....  
.....

8. \*The place at which and the circumstances in which the injuries were inflicted  
.....  
.....  
.....

9. If the application is being submitted outside the statutory time limits as set out in Section 5 of the  
Acts, provide an explanation  
.....  
.....  
.....

Form 2

(Application for compensation for members of An Garda Síochána only, malicious injuries on duty)

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10. Other facts and circumstances (if any) which the applicant desires to bring to the Minister's notice in support of the application

.....  
.....  
.....  
.....

(Signed) \_\_\_\_\_

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20

**NOTE** - This form, when completed, should be sent **with a completed Privacy Notice** by post in an envelope addressed “for the attention of the Garda Compensation Section, Department of Justice, 51 St Stephen’s Green, Dublin 2, D02 HK52

\*Particulars that are too long to be stated on this form should be set out on a separate sheet annexed to this form.



**An Roinn Dlí agus Cirt**  
**Department of Justice**

**Department of Justice**

**Form of Application for Compensation Under  
the Garda Síochána (Compensation) Acts 1941 and 1945**

**Privacy Notice**

***Introduction***

1. The data you provide is collected by Garda Compensation Unit, a Business Unit of the Department of Justice (DoJ). The data controller for the information you provide is the Department of Justice and the data controller's contact details are:

Garda Compensation Unit  
Department of Justice  
51 St. Stephen's Green  
Dublin 2, DO2 HK52  
email: [gardacompo@justice.ie](mailto:gardacompo@justice.ie)

***How will your personal data be used?***

2. We may use the personal data you provide in this form for the following purpose(s):
  - To process an application under the Garda Síochána (Compensation) Acts 1941 – 1945.

***Legal Basis for processing your Personal Data***

3. Our legal basis for collecting and processing this data is as follows:
  - Section 5-6 of [The Garda Síochána \(Compensation\) Acts 1941 – 1945](#).

***Security of Personal Data***

4. The personal data provided will be stored securely on DOJ IT servers. It may be shared, where appropriate, with third parties including the following:
  - Chief State Solicitors Office
  - Chief Medical Officer, An Garda Síochána

### **Contact for Queries**

5. The contact for any queries in relation to this form is:

Garda Compensation Unit  
Department of Justice  
51 St. Stephen's Green  
Dublin 2, DO2 HK52

email: [gardacompo@justice.ie](mailto:gardacompo@justice.ie)

### **How long will Personal Data be retained?**

6. This data will be stored in accordance with the requirements of the National Archives Act 1986.

### **How to Request a copy of your Personal Data**

7. You can request a copy of your personal data by completing a Subject Access Request (SAR) form, available:

- at [http://www.justice.ie/en/JELR/Pages/Data\\_Protection](http://www.justice.ie/en/JELR/Pages/Data_Protection) or
- from the Data Protection Support and Compliance Office (DPSCO) at the address below.

Forward the completed form by email to [subjectaccessrequests@justice.ie](mailto:subjectaccessrequests@justice.ie) or by post to the DoJ Data Protection Officer at the address below. You will be required to verify your identity before the data can be forwarded to you. The time limit for responding to a SAR commences once your identity has been verified.

### **Your Rights in relation to your Personal Data**

8. You have the right to rectify any inaccuracies in your data. To do this you should write to:

Garda Compensation Unit  
Department of Justice  
51 St. Stephen's Green  
Dublin 2, DO2 HK52

email: [gardacompo@justice.ie](mailto:gardacompo@justice.ie)

documenting the inaccuracies which need to be rectified. The right to rectification is not absolute and each request will be considered on its own merits.

9. You have the right, where appropriate, to obtain erasure of your data and/or a restriction on the processing of your data as well as the right to object to the processing of your data. The right to erasure, restriction or objection is not absolute and each request will be considered on its own merits.
10. You have the right to lodge a complaint with the Data Protection Commission (DPC). You can contact the DPC by webforms on their website [www.dataprotection.ie](http://www.dataprotection.ie) or by post to:

21 Fitzwilliam Square South  
Dublin 2  
D02 RD28

Further details in relation to your data protection rights can be found in the Department of Justice Data Protection Policy available at:

[http://www.justice.ie/en/JELR/Pages/Data\\_Protection](http://www.justice.ie/en/JELR/Pages/Data_Protection)

#### **Contact the DPO**

You can contact the Data Protection Officer (DPO) for the Department of Justice by post at:

The Data Protection Officer  
Department of Justice  
51 St. Stephen's Green  
Dublin 2, D02 HK52  
Or

by email - [dataprotectioncompliance@justice.ie](mailto:dataprotectioncompliance@justice.ie)

**I acknowledge that I have read and understood the information provided above by the Department of Justice for the purposes of ensuring fair and transparent processing of my personal data.**

**Name of Applicant:** \_\_\_\_\_  
**BLOCK LETTERS**

**Signature of Applicant:** \_\_\_\_\_

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