

Consent to Disclose Personal Information to a Third Party

Dear Tenant,

We take data protection seriously and work very hard to keep your personal information secure and safe. We also understand that sometimes you want someone else (a "third party") to speak for you or act on your behalf. This could be e.g.: Relative, tenant representative, local MP or Councillor, solicitor or a friend.

Your specific consent is required before the Housing Association can release personal information which we hold about you to any third party including people speaking or acting on your behalf. This is an important part of keeping your personal data safe.

We will also need to ask any third party a series of security questions when they contact us. We do this with all customers as it is an important part of our data security processes and in keeping your information safe.

All information provided by you and the third party will be kept securely on the Association's system and disposed of securely when no longer needed. To learn more about the Association's approach to data protection please see our Privacy Policy at https://www.cadwyn.co.uk/privacy-policy/

If you want the Association to disclose your personal information to a third party and/or discuss your affairs, please read this Guidance, complete and sign the form and return it to the Association:

- >> By post to Cadwyn 197 Newport Road Cardiff CF24 1AJ
- >> By e-mail to info@cadwyn.co.uk

Please note emailed forms need to include a signature, this can be a clear photograph of the filled in form.

If you require any assistance please contact the Customer Services on: 029 2049 8898



1. Your identity.

To identify you, we will need your name and address. Please include any reference numbers which will help us to identify your records, such as your tenancy reference if you know this.

| Name: | |
|------------------|--|
| Your Address: | |
| Postcode: | |
| Rent Ref Number: | |

2. We need to know what personal information you wish to be disclosed.

This may be information in respect of a specific matter, for example all details of your application for housing or transfer, or your rent account. If you are happy for all information to be disclosed, select the All category. If you only want certain information to be released you must specify what this is by \checkmark the relevant line.

| Rent and Service Charge account | |
|--|--|
| Tenancy Management (e.g. mutual exchanges, neighbour problems etc) | |
| Benefit claims and enquiries | |
| Repairs and property improvements | |
| Application for housing or rehousing | |
| Domiciliary care enquiries | |
| All | |



| 3. Please tell us why you want the information to be disclosed, and what you are authorising the person or persons who receive it to do with it. | | | | | |
|---|---------|---------------------------------------|--|--|--|
| This helps us manage requests and improves security. | | | | | |
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| | | | | | |
| 4. Please tell us who v | ou wan | t the information to be disclosed to. | | | |
| We will need their name | | | | | |
| Name: | | | | | |
| Address: | | | | | |
| Postcode: | | | | | |
| Telephone: | | | | | |
| E-mail: | | | | | |
| Relationship to you: | | | | | |
| E Hawlens de verrui | ab Abia | | | | |
| 5. How long do you wish this consent to remain valid for? | | | | | |
| After this date, we will not release your information to the person(s) named without your consent. You can choose for the consent to be on going but we would | | | | | |
| recommend that you do have an end date so you can review the need for the | | | | | |
| disclosure in the future. We will ask you to review this information annually. | | | | | |
| Date when consent en | ds: | | | | |
| On going consent: | | | | | |



6. Third Party's Security Questions.

In the same way that we ask you for a password and questions for security purposes, we need the third party to use a password and answer security questions. These should be different from your own password and security questions. We will ask three different questions when the third party calls. An annual review of this information will be undertaken and a review form sent to you.

| Password (this is mandatory) |): |
|---|---|
| Third party postcode: | |
| Third party date of birth: | |
| Mother's maiden name: | |
| Name of third party first scho | ol: |
| Name of third party first pet: | |
| Declaration | |
| You must sign this section to a | confirm you have read and understood the guidance e form is correct. |
| information which the Associa | g Association consent to disclose such personal tion holds and which is detailed above. Disclosure of stricted to the person or persons named above and this specified. |
| I understand that I can change and can do this by contacting | e or withdraw my consent for this disclosure at any time Customer Services. |
| Signed: | |
| Name: | |
| Date: | |