**AUTHORISING SOMEONE TO ACT ON YOUR BEHALF**

**Please read this information carefully before completing this authority:**

By signing this authority to act you are allowing us to exchange and disclose information about you with your agent or representative and to deal with them on various matters relating to your tenancy with Citizen Housing Group Ltd (Citizen), including giving access to your “My Account”.

We will still send correspondence to you rather than to your representative (unless you indicate otherwise). This authority means we can deal with your representative verbally or in writing on all aspects of your tenancy. I would ask you to note we may disclose personal, sensitive information to your representative. This agreement will remain in place until you inform us of a change in circumstances.

Citizen is the data controller as specified in the Data Protection Act 2018. We hold information about you for the purposes of managing your tenancy. We share information with other authorities where we have permission to do so, or where the law permits us to.

For further information on how Citizen process and share your data, please visit <https://www.citizenhousing.org.uk/privacy/#row1>

Please note that signing this authority does not allow your representative to request personal information held about you under the subject access provisions of the Data Protection Act 2018.

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| **Tenant/Leaseholder Information** |
| **Tenant Name** | **Title** |  |
| **First Name(s)** |  |
| **Last Name** |  |
| **Joint Tenant Name** | **Title** |  |
| **First Name(s)** |  |
| **Last Name** |  |
| **Address** |  |
| **Correspondence sent to representative?** | **Yes** |  | **No** |  |
| **Is your representative a current occupant in your home?** | **Yes** |  | **No** |  |
| **Signature of Tenant** |  | **Date** |  |
| **Signature of Joint Tenant** |  | **Date** |  |

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| **Representative Details** |
| I understand as a representative I can discuss tenancy and rent matters on behalf of the tenancy holder(s) with Citizen. |
| **Name of Representative** | **Title** |  |
| **First Name(s)** |  |
| **Last Name** |  |
| **Address** |  |
| **Relationship to Tenant** |  | **Date of Birth** |  |
| **Email Address** |  | **Contact Number** |  |

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| **What is your main Language?** |  |

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| **If English is not your main language, how well can you speak English?** |
| **Very well** |  | **Well** |  | **Not very well** |  | **Not at all** |  |

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| --- | --- | --- | --- | --- |
| **Can you read English?** | **Yes** |  | **No** |  |

|  |  |
| --- | --- |
| **If you cannot read English, what language can you read?** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Representative Signature** |  | **Date** |  |

**Please send the completed form back to** **info@citizenhousing.org.uk** **or by post to Citizen Housing, 4040 Lakeside, Solihull Parkway, Birmingham, B37 7YN**