

This form should be completed where customer authorises Accord Mortgages to give information regarding their accounts to a named individual. Please pass completed forms to Accord Support Team.

Customer(s) and Account(s)

Customer(s) Details:

Title	<input type="text"/>	Title	<input type="text"/>
Surname	<input type="text"/>	Surname	<input type="text"/>
Forename(s)	<input type="text"/>	Forename(s)	<input type="text"/>
Postcode	<input type="text"/>	Postcode	<input type="text"/>
Date of Birth	<input type="text"/>	Date of Birth	<input type="text"/>

Account(s) where disclosure can be made

Disclosure Authority

Details of the person to whom a disclosure can be made:

Title

Surname Forename(s)

Address

 Postcode

Date of Birth Telephone Number (optional)

Consent by Customer(s)

I/We authorise you to discuss the above account(s) with the person identified in the Disclosure Authority section above. This person will not be allowed to give you instructions. I/We will make any amendments or transactions required. The authority will last until the account closes or I/we inform you otherwise.

All parties to an account must sign

Signature(s) _____ Date _____

Disclosure Authority's Consent

We will respect your right to privacy and will not disclose your personal information to anyone except with your consent or if the law, public duty or legitimate interest require us to do so.

Our booklet 'Your Rights and the Data Protection Act' is available from our head office or on our web site www.accordmortgages.com.

You have a right of access under the Data Protection Act to your personal records held by us, subject to payment of a fee. A Subject Access Request Form (ACC 39) can be obtained from our Head Office, Accord Mortgages, 1 Filey Street, Bradford BD1 5AT or from our website www.accordmortgages.com. You have the right to have any inaccuracies corrected.

From time to time we may notify you of additional products and services from us, our subsidiaries or other organisations, which may be of benefit to you, using any of the contact details available.

If you do not wish to receive this information, please tick the box.

I agree to Accord Mortgages using my details above to verify my identity when I contact them as the Disclosure Authority for the above customer(s) account(s) and for marketing if I have not ticked the box above.

Signature of authorised person _____ Date _____
(Person to whom disclosure can be made)