

Customer name _____
 Address _____

 Post code _____

 Your customer number _____
 Date _____

THIRD PARTY CONSENT FORM

Please use the form below, if you would like to nominate someone else to discuss your account.

Affinity Water complies with the Data Protection Act 2018. The Act states that we must not disclose Personal Data without the express consent of the individual. In order for us to disclose information to another party on your behalf, we must have your consent in writing.

After completing the form below it should be signed by the person whose name is on the account and returned to us at the address above. By completing the section below, you will be giving Affinity Water, or our authorised representative, permission to discuss your account or any other matter with another nominated party, on a permanent basis. If you wish to cancel or change this arrangement at any time, you will need to write to us again.

PLEASE PRINT

I hereby authorise: _____

Contact telephone number: _____

Address: _____

who is my _____ Insert relationship i.e. daughter / solicitor)
 to discuss/manage my account in regards to:

PLEASE TICK ALL THAT APPLY

- | | | | |
|-----------------------------------|--------------------------|--|--------------------------|
| Payment / Recovery queries | <input type="checkbox"/> | other _____ | <input type="checkbox"/> |
| Bill queries | <input type="checkbox"/> | (please state) | |
| Meter queries | <input type="checkbox"/> | | |
| All matters concerning my account | <input type="checkbox"/> | I would like my bill sent to this person | <input type="checkbox"/> |

Signed: _____ Date: _____

(Please Note - The person signing the form must be the above named customer in the printed section above)