PO Box 3191, Bristol, BS1 9HY

 Tel
 0117 979 2222

 Fax
 0117 929 3787

 DX
 98850 Bristol 2

Property address: Account(s): Borrower Name(s):

Under the terms of the Data Protection Act, we cannot give information about your Mortgage account to any person unless they are named on the Mortgage Deed. If you wish us to discuss the details of your mortgage account with another party, please sign and return the attached form in the pre-paid envelope provided. Please note that the authorisation section must be signed and dated by all people who are named on the mortgage.

Your authority will be valid for the period you state on your signed Provision of Consent form. If you should wish to cancel authority before the period is up, you must contact us to let us know.

When contacting us, for security purposes your nominated third party will be asked to provide us with your personal and mortgage account details in order to satisfy our standard Data Protection checks. If the third party is unable to provide the required information we will not be able to discuss your account further with them.

ACCEPTS NO LIABILITY FOR DISCUSSING CONFIDENTIAL INFORMATION RELATING TO YOUR MORTGAGE ACCOUNT WITH ANY PERSON TO WHOM YOU GIVE AUTHORITY.

Yours sincerely

Mortgage Debt Management UK

FORM OF CONSENT

Important Notice: Use of your information – Bank of Ireland (UK) plc

Bank of Ireland (UK) plc ('the Bank') takes the security of customer information and protecting privacy seriously. This document is used to record your instructions and consent for the Bank to disclose your information to a 3rd Party in the way described below.

When contacting us, for security purposes your nominated third party will be asked to provide us with your personal and mortgage account details in order to satisfy our standard Data Protection checks. If the third party is unable to provide the required information we will not be able to discuss your account further with them.

A 3rd Party is an organisation or individual other than yourself or the Bank. Without your consent the Bank will not provide your information to a 3rd party unless - in the course of business - we have explained we will do so, or the Bank holds a legal or regulatory obligation to do so. Signing this document means you provide your consent to Bank of Ireland (UK) plc disclosing your information in the way described. <u>All</u> sections must be fully completed.

Your account number(s):

Important note: If you do not provide us with an account number we will be unable to locate your account and apply this authority. If this Form of Consent relates to more than one account, please provide each account number. Each party providing consent on this form is required to be a named account holder for **each** account.

3rd Party: organisation or individual to	o whom your instructions relates:
--	-----------------------------------

Name of 3rd Party – Organisation or individual to whom your instruction relates:

Registered Address:

Contact Numbers:

Capacity in which 3rd Party acts: Please indicate the specific capacity (personal or professional) in which the 3rd party is acting:

	scribe what ation you w	at: ant the Bank to	o disclose:				
(b) The reason for the disclosure:							
The Bank does not accept 'open ended' Forms of Consent. Please choose either: (a) The start and expiry date of your Form of Consent :							
Start:	1	1	То:	1	1		
OR (b) If it app	blies only to	a 'one off' dis	closure of information, Pl	ease tick	this box:		

Signature(s) and date(s) - once completed please sign and date below. Once your Form of Consent is received and successfully checked, we will act in accordance with it.

Signature 1:	Signature 2:
Date:	Date:
Signature 3:	Signature 4:
Date:	Date: