



# Housing Representation Declaration Form

## Consent for Representative to Discuss

### Housing Case / Tenancy

Moray Council is committed to protecting personal information in compliance with Data Protection legislation, including the United Kingdom General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. Moray Council is the Data Controller for this process, please see our Privacy Notice [www.moray.gov.uk/PrivacyNotice](http://www.moray.gov.uk/PrivacyNotice) for information about how the personal data on this form will be used.

The Council will always discuss your housing case / tenancy with you, however, if you wish for the Council to discuss your housing case / tenancy with a representative on your behalf, please complete and return this form.

The information you provide about yourself, and the information provided by and about your appointed representative on this form will be processed in accordance with the Privacy Notice attached to this form.

<b>CUSTOMER/TENANT DETAILS</b> (to which this declaration applies)	
Full Name	
Address	
Phone Number	
Email	
<b>APPOINTED REPRESENTATIVE DETAILS</b>	
Representative's Full Name	
Relationship to customer	
Home Address	
Phone Number	
Email	

I give my permission for the above named representative to share / discuss my housing case / tenancy and the following information relating to my case with Moray Council on my behalf (please tick all that apply):

Type of Personal Information	Please tick if you consent (optional)
Name	
Date Of Birth	
Contact details (such as email address, phone number, home address)	
Gender	
Bank/Credit details	
Photographic information (such as the inside or outside of a property)	
Identification numbers (such as application number, tenancy reference number etc.)	

### PERSONAL DATA

I give my consent for Moray Council to discuss / share the above confirmed categories of information, which may affect my housing case / tenancy, with my stated Representative.

<b>CUSTOMER / TENANT'S SIGNATURE</b>		<b>DATE</b>	
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### SPECIAL CATEGORY PERSONAL DATA

Type of Special Category	Please tick if you consent (optional)
Race or Ethnicity	
Political, philosophical, religious beliefs	
Health and Medical Information	

I consent for Moray Council to discuss/share the selected special categories of personal data that may affect my housing case / tenancy, with my stated Representative.

<b>CUSTOMER / TENANT'S SIGNATURE</b>		<b>DATE</b>	
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### CRIMINAL CONVICTIONS AND OFFENCES

I consent for Moray Council to discuss / share my personal data relating to criminal convictions and offences that may affect my housing case / tenancy, with my stated Representative.

<b>CUSTOMER / TENANT'S SIGNATURE</b>		<b>DATE</b>	
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**RIGHT TO WITHDRAW CONSENT**

I understand that I have the right to withdraw or update any of the above consents at any time, by phoning 0300 123 4566 or by emailing the relevant team below. Please tick from the list below the one that best applies to you:

Are you a:	E-mail	Please Tick /
Housing Options customer	<a href="mailto:housing.options@moray.gov.uk">housing.options@moray.gov.uk</a>	
Homeless or Housing Applicant	<a href="mailto:housing.needs@moray.gov.uk">housing.needs@moray.gov.uk</a>	
Current Tenant	<a href="mailto:housing@moray.gov.uk">housing@moray.gov.uk</a>	

**DECLARATION**

I confirm that:

- The [Housing Representation Declaration Privacy Notice](#) has been made available to me and I am aware that the information I have selected to be shared/discussed with my representative, will be processed in accordance with this Privacy Notice.
- I understand that Moray Council will contact me annually to review the consent I have provided in this declaration so that the information I have consented to share can continue to be shared / discussed with my representative

<b>CUSTOMER / TENANT'S SIGNATURE</b>		<b>DATE</b>	
<b>REPRESENTATIVE'S SIGNATURE</b>		<b>DATE</b>	
<b>HOUSING SIGNATURE</b>		<b>DATE</b>	
<b>PRINT NAME</b>			

Please Note - This authorisation cannot be used where the person giving the permission is losing or has lost capacity to act on their own behalf. If this is the case you may need to seek medical and/or legal advice on what you need to do. More information can be found using this link <https://www.publicguardian-scotland.gov.uk/power-of-attorney>.

**Please complete and return the form as soon as possible using the relevant email (as above) or in the enclosed pre-paid envelope.**