



Authorisation Form

CONSENT FOR PERSONAL INFORMATION TO BE DISCLOSED TO AN AUTHORISED PERSON

I confirm that the person named below is authorised to discuss any and all personal information and request changes to account details in relation to this property with Estates & Management Ltd on my behalf.

Name: *

Relationship to homeowner: *

Authorised Person's Details:

Postal address line 1: *

Postal address line 2: *

Postal address line 3:

Postal address line 4:

Postal address Postcode: *

Email address: *

Please confirm "Email address:": *

Phone number: *

Would you like your account contact details to be updated with the party's contact details? *

Please tick here if you would like to be set up for paperless billing.

Please note that the email address registered with your online account will be updated to the authorised party's email address given here.

SUBMIT

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