



## Department of Housing General Collection and Disclosure Authority

I/we,  (print name/s)

of  (address)

T. File/CRN/s No  Date/s of Birth

1. Pursuant to section 26(2) of the Privacy and Personal Information Protection Act, consent, direct and authorise the collection and disclosure of personal information about me/us by the Department and my/our advocate regarding my/our tenancy/application to

of

(insert name of advocate or other representative)

(insert address of person to receive information)

2. I/we understand that this authority cannot permit the Department to provide or collect personal information about any other person other than myself/us or my/our tenancy/application.
3. I/we acknowledge that the above consent under section 26(2) of the Act will allow release of details which would otherwise breach section 19 (health etc) of the Act provided that it is relevant to my/our application/tenancy.
4. I/we give my/our consent pursuant to section 26(2) of the Act to the Department not complying with the privacy principles contained in sections 10 (notification of collection) and 18 (internal use) of the Act provided that it is relevant to my/our application/tenancy.
5. I/we acknowledge that this authority shall cease upon my/us giving notice to the Department of cessation of this authority and I/we have proof of receipt of such notice by the Department.

\_\_\_\_\_  
Signature/s of Tenant/Applicant

\_\_\_\_\_  
Date

**If this General Collection and Disclosure Authority is for a joint tenancy or joint housing application then all parties must complete and sign this form.**