

**START MORTGAGES
THIRD PARTY AUTHORISATION FORM**



BORROWER INFORMATION:

Borrower Name(s): _____
Mortgage Account Number: _____
Correspondence Address: _____

AUTHORISED THIRD PARTY INFORMATION:

Name: _____
Address: _____

Telephone Number: _____
Relationship to Borrower(s): _____
Reason for Third Party Authority: _____

Fees Payable to Third Party (if any): _____

Please confirm the password to be used by the Authorised Third Party to access the account when calling Start Mortgages. To protect the security of the account, the password should not be disclosed to anyone other than Start Mortgages, the borrower(s) and the Authorised Third Party.

The password must be 4 characters or more and also include at least one numerical digit e.g. start90. Please be advised that the form will not be accepted without a valid password.

Password:

I/We hereby authorise the above named third party to act as my authorised third party in respect of my/our mortgage facilities with Start Mortgages for the dates specified below

I/We acknowledge and agree that Start Mortgages may disclose all information (including sensitive personal information e.g. health or any criminal convictions I/We may have) regarding my/our facilities to the above named third party and that such third party may contact Start Mortgages on my/our behalf.

I/We hereby authorise the above named third party (at his/her discretion) to provide Start Mortgages with any and all personal information which I/We have disclosed to the above named third party. I/We acknowledge that all my/our personal information provided to Start Mortgages by the above named third party acting on my/our behalf will be held by Start Mortgages and used for the continued management of my/our account.

I/We agree that Start Mortgages can contact me/us if Start Mortgages is unable to obtain meaningful engagement from my/our authorised third party in a timely manner which could result in a detriment to me/us.

I/We request that Start Mortgages contact my authorised third party in respect of my/our mortgage facilities in the following instances:

Please tick below as appropriate

- All Matters
- Completion of a Standard Financial Statement and Assessment for Mortgage Repayment Options
- Payment queries and/ or processing of any payments to my/our Mortgage Account
- Sale of the Property
- Other - Please specify:

I/We agree that Start Mortgages can contact me in conjunction with my authorised third party in respect of my/our mortgage facilities in the following instances:

Please tick below as appropriate

- No Matters
- Completion of a Standard Financial Statement and Assessment for Mortgage Repayment Options
- Payment queries and/ or processing of any payments to my/our Mortgage Account
- Sale of the Property
- Other - Please specify:

Additional Third Parties

Do you have a third party in place to represent you already?

Yes No

If Yes:

Please provide their Name:

Do you wish to leave them in place or remove them? Leave them Remove them

Please be advised that you and/or your third party may be asked to produce a valid photographic ID (e.g. passport, drivers licence) in the event of a face to face meeting.

Please note that where the third party authorised is a Company it is understood that all employees or representatives of that Company are authorised to represent you.

This authority will remain in place until cancelled by you.

Borrower(s) Signature(s):

Authorised Third Party Signature:

Signed

Signed

Date

Date

Signed

Date