

## **Client Authorisation Form**

Important: Must be Signed

Century Capital Partners 10 Albemarle Street Mayfair London W1S 4HH

I/We authorise you to make such enquiries, amendments and obtain such confirmations and references and you may deem appropriate from any person or company, including recent bureaux, mortgage lending companies now or at any time in the future with reference to my/our mortgage/loan application and that this information may be received by fax.

| Signed |  |
|--------|--|
| Name   |  |
| Date   |  |

I/We understand that if my/our application is made in joint names and Century Capital searches the files of a credit reference agency an "association" will be created with the other person(s) named within this application. Century Capital or other lenders may take this financial association, created between the other applicant(s) and myself, into account in future applications for credit or financial services. The association will remain between us until one of us successfully applies for "disassociation" with the credit reference agencies.

If I am a sole applicant, information held about me by credit reference agencies may be linked to records relating to one or more of my partners and, for the purposes of this application, I may be financially linked as my application may be assessed with reference to any "associated" records.

I/We agree that Century Capital may make enquiries of any person including current and previous lenders, employers, landlords, accountants, bankers, the Land Registry, the Inland Revenue, and the Council of Mortgage Lenders Possessions Register in the processing of this application and the administration of my/ our account.

I/We understand that any telephone calls to do with my/our application or mortgage may be recorded and monitored for security, quality and/or training purposes.

You may be assured that we and any company associated with us will treat all personal data and sensitive personal data as confidential and will not process it for anything other than a legitimate purpose. Steps will be taken to ensure that the information is accurate, kept up to date and not kept for longer than is necessary. Measures will also be taken to safeguard against unauthorised or unlawful processing and accidental loss or destruction or damage to the data.

If at any time you wish us, or any company associated with us to cease processing your personal data or sensitive personal data, please contact The Data Protection Officer on 020 7495 9191 or in writing at Century Capital, 10 Albemarle Street, Mayfair, London, W1S 4HH.

You have the right to obtain a copy of the details and personal information that Century Capital hold on you. If you wish to obtain a copy of the personal information we hold about you, please contact us on 020 7495 9191 or in writing at Century Capital, 10 Albemarle Street, Mayfair, London, W1S 4HH.

You have the legal right of access to my/our personal records held by credit and fraud agencies and to receive details of those fraud prevention agencies from whom Century Capital obtains and with whom Century Capital records information about me/us. Century Capital will supply their names and addresses upon written request.

## Specific Authority to obtain References and Disclose Information

I/We authorise: -

a) My/Our Solicitor to disclose to Century Capital any information relevant to its lending decision and I/we waive any right to claim solicitor/client confidentiality or legal privilege in respect of such information;

b) Century Capital and/or Solicitors acting on behalf of Century Capital to

- Obtain (a) reference(s) or information relating to this mortgage application from any accountant / lender / landlord or employer named in this application form and correspondingly authorise them to provide the reference(s) / information and to make such other enquiries and take up such references as it considers necessary in relation to my/our mortgage
- Disclose information in or in connection with this mortgage application to any provider of buildings, contents or payment protection insurance in connection with my/our mortgage.

Please check that your application form has been fully completed before you sign it and that all information is accurate and correct. Incomplete or illegible applications will cause delay. By signing this application you agree that we can use your information for all the purposes referred to above and you agree to make the declarations listed in this application form.

| Signed: |  |
|---------|--|
| Name:   |  |
| Date:   |  |

10 Albemarle street | Mayfair London | W1S 4HH