

Partner Finance
PO Box 2501
Cardiff
CF23 0FP

Thank you for contacting us about sharing information on your Barclays Partner Finance account(s) with another person. In order for us to do this, we need you to complete and return the section of the attached form that relates to your request depending on the level of authority you wish the person (Nominee) or Company to have.

1. AUTHORITY TO PROVIDE INFORMATION TO A NOMINATED PERSON/ COMPANY

Please note that this authority allows us to provide information only, it does not allow us to accept any instructions to make any changes to your account/s.

Customer Name:

Address:

Contact telephone number:

Account number(s) authority relates to:

I authorise you to provide information relating to my above account(s) to the following person.

Please complete the details of the nominated person:

Full name:

Full address & postcode:

Nominee's date of birth:

Nationality:

Signature of nominee:

Telephone number:

Email address:

(We will only use these details if it is necessary to contact the nominee about this authority)

Nominee's password for when they call us:

Nominee's mother's maiden name:

(to assist in the identification of nominee)

Please complete if you wish to give authority to an organisation.

Name of firm:

Address:

Telephone number:

(We will only use these details if it is necessary to contact the nominee about this authority)

Email address:

Case Id. / Reference:

This authority is to remain in force until cancelled by me in writing.

I confirm I have the above person's permission to provide their details to Barclays and they are aware the data will be used for this purpose. Further information about how Barclays Partner Finance may use your personal data is available in the Privacy policy accessible at:

www.barclayspartnerfinance.com

SIGNATURE OF ACCOUNT HOLDER:	DATE:
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PLEASE ENSURE THAT YOU HAVE COMPLETED ALL THE DETAILS REQUESTED.

2. AUTHORITY TO PROVIDE INFORMATION TO AND ALLOW A NOMINATED PERSON TO MAKE TRANSACTIONS ON YOUR BEHALF

Please note that this authority allows us to provide information to the nominated party and for them to make transactions on the account only, it does not allow us to accept any instructions to make any changes to your account(s).

Customer Name:

Address:

Contact telephone number:

Account number(s) authority relates to:

I authorise you to provide information relating to my above account(s) to and receive payments from the following person.

<u>Please complete the details of the nominated person:</u>	
Full name:	
Full address & postcode:	
Nominee's date of birth:	Nationality:
Signature of nominee:	
Telephone number:	
Email address:	
(We will only use these details if it is necessary to contact the nominee about this authority)	
Nominee's password for when they call us:	
Nominee's mother's maiden name:	
(to assist in the identification of nominee)	

This authority is to remain in force until cancelled by me in writing.

I confirm I have the above person's permission to provide their details to Barclays and they are aware the data will be used for this purpose. Further information about how Barclays Partner Finance may use your personal data is available in the Privacy policy accessible at:

www.barclayspartnerfinance.com

SIGNATURE OF ACCOUNT HOLDER:	DATE:
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PLEASE ENSURE THAT YOU HAVE COMPLETED ALL THE DETAILS REQUESTED.

IF YOU ARE COMPLETING THIS FORM, PLEASE ENSURE YOU ENCLOSE A COPY OF ONE DOCUMENT FROM THE IDENTIFICATION LIST AND A DIFFERENT DOCUMENT FROM THE ADDRESS VERIFICATION LIST FROM THE IDENTIFICATION AND VERIFICATION CHECKLIST BELOW

3. REGISTER A POWER OF ATTORNEY

Please note that this authority allows your Power of Attorney to act on your behalf according to the instructions given within the Power of Attorney document.

You can find more information about this on www.gov.uk/power-of-attorney

Customer Name:

Address:

Contact telephone number:

Account number(s) authority relates to:

I authorise you to act on the enclosed Power of Attorney Document

<u>Please complete the details of the nominated person:</u>	
Full name:	
Full address & postcode:	
Nominee's date of birth:	Nationality:
Signature of nominee:	
Telephone number:	
Email address:	
(We will only use these details if it is necessary to contact the nominee about this authority)	
Nominee's password for when they call us:	
Nominee's mother's maiden name:	
(to assist in the identification of nominee)	

This authority is to remain in force until cancelled by me in writing.

I confirm I have the above person's permission to provide their details to Barclays and they are aware the data will be used for this purpose. Further information about how Barclays Partner Finance may use your personal data is available in the Privacy policy accessible at:

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SIGNATURE OF ACCOUNT HOLDER:	DATE:
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IF YOU ARE COMPLETING THIS FORM, PLEASE ENSURE YOU ENCLOSE A COPY OF ONE DOCUMENT FROM THE IDENTIFICATION LIST, A DIFFERENT DOCUMENT FROM THE ADDRESS VERIFICATION

LIST AND AN ORIGINAL OR CERTIFIED COPY OF POWER OF ATTORNEY DOCUMENT FROM THE IDENTIFICATION AND VERIFICATION CHECKLIST.

IDENTIFICATION AND VERIFICATION CHECK LIST

So that we can confirm the identity of your nominated person please provide a copy of one document from the Identification list and a different document from the Address Verification List below;

IDENTIFICATION	TICK
Valid passport	
Valid photo-card driving licence Full paper driving licence or provisional photo-card driving licence (UK issued only)	
Valid identity card (not applicable for UK citizens)	
Notification of entitlement to: state or local authority benefit; tax credits; pension (from the Department of Work and Pensions) or a government or local authority grant Dated within the last 12 months and shows customer's full name and address	
HMRC tax coding or correspondence showing customer's permanent National Insurance number; Tax assessment or statement of tax credits. Dated within the last 12 months and shows customer's full name and address	
ADDRESS VERIFICATION	
Valid photo-card driving licence Full paper driving licence or provisional photo-card driving licence (UK issued only)	
Notification of entitlement to: state or local authority benefit; tax credits; pension (from the Department of Work and Pensions) or a government or local authority grant Dated within the last 12 months and shows customer's full name and address	
HMRC tax coding or correspondence showing customer's permanent National Insurance number; Tax assessment or statement of tax credits. Dated within the last 12 months and shows customer's full name and address	
Bank account; mortgage or credit card statement or correspondence. Dated within the last 3 months, not Internet printed and shows customer's full name or initials and address	
Utility bill or correspondence (excluding mobile phone bills and mobile phone correspondence). Dated within the last 3 months; not Internet printed; shows customer's full name or initials and address and customer reference or account number. Any 'bundles' packages must include a landline bill.	
Council tax bill or demand letter; local council rent card or local council tenancy agreement Dated within the last 12 months and shows customer's full name or initials and address	
POWER OF ATTORNEY	
Original or Certified Copy of Power of Attorney Document	