



Authority to Discuss

The completion of this form will authorise Cherwell District Council to discuss your housing register application and housing needs with the authorised person detailed below.

Applicant Details

Full Name:	
Date of Birth:	
Login Reference Number:	

Details of Authorised Person

Full Name:	
Address:	
Contact Phone Number:	
Contact Email:	
Relationship to Applicant:	

Please give authority:

Indefinitely For a limited period

If for a limited period, please specify when this authority is valid until:

I hereby give permission for Cherwell District Council to discuss my housing register application and housing needs with the above-named authorised person. I understand that I can withdraw consent at anytime by contacting Cherwell District Council.

Applicant Signature:	
Date:	

You can return the form to us in the following ways:

Email: housingregister@cherwell-dc.gov.uk

Post: Cherwell District Council, 39 Castle Quay, Banbury OX16 5FD