

Third party consent application form

To nominate somebody to discuss your account on your behalf, please fill in the form below and send back to Metropolitan, Driscoll 2, Ellen Street, Cardiff, CF10 4BP, or send us a contact form at metropolitan-uk.co.uk. If you have any queries about this form, please contact us on 02920 100346.

For us to disclose information to somebody else on your behalf, we need your consent and their consent in writing. The form should be signed by you and the nominated third party. By completing the below form, you are giving us permission to discuss/manage your account with your nominated third party. If you want to cancel this arrangement or request another form, you can log into your account or contact us for more information

Your account number:		
Your name:		
Your address:		
Daytime phone number:	Mobile number:	
Email address:		

Third party's name:		
Address:		
Daytime phone number:	Mobile number:	
Email address:		
Relationship to you:		

What do you want your nominated third party to do:

Deal with general account queries, complaints and billing queries	Pay bills with permission from the cardholder (The third party would not be liable for the charges)	
Be contacted if bills are not paid	Receive my bills	

Your signature:	Date:	
Nominated third party's signature:	Date:	