

Consent Form I (state name of person giving consent) of (state address) Date of birth // hereby authorise the Department of Social Security to request and submit from other government departments, authorities, agencies or private sector bodies such as banks or building societies any information that may be required in connection with my application. Signature (of person giving consent)

Date

How we collect and use information

The Department of Social Security collects information for the purposes of dealing with social security benefits and other non-contributory benefits. The information we collect about you depends on the reason for your business with us, but we may use the information for any of these purposes.

We may check information about you with other information we have. We may exchange information about you from other government departments, authorities, agencies or private sector bodies, such as banks and any organisation that may lend you money. We may give information to certain other organisations, as the law allows, to:

- check the accuracy of information;
- prevent or detect crime;
- protect public funds in other ways; and
- use in research or statistics.

The Department of Social Security is the data controller for the purposes of the Data Protection Act.