

# Third party declaration



0345 149 7764



0345 149 7765



resicustsupport@paragonbank.co.uk



www.paragonbank.co.uk

# To: Paragon Bank PLC

I/We (name/s)	<input type="text"/>
	<input type="text"/>
of (address)	<input type="text"/> <hr/> <input type="text"/>
	Postcode
jointly and separately waive any duty of confidentiality you may have to me/us under data protection legislation and under general law and hereby authorise you to disclose any personal details you hold about me/us or the operation of my/our account(s) with you to:-	
Name	<input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Relationship	<input type="text"/>
Address	<input type="text"/> <hr/> <input type="text"/>
	Postcode
Email address	<input type="text"/>
Telephone	<input type="text"/>
Password*	<input type="text"/>
<small>*Required for identification purposes of 3rd party during telephone contact</small>	
Signature of 3rd party	<input type="text"/>

This authority will remain in force until such a time as we revoke it in writing.

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

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