

Parliamentarian Representation

Information Sharing – Client Consent

Section 1: Person Providing Consent

Name: _____ Date of Birth: _____

Address: _____ Phone: _____

Section 2: Client Authorisation

I give consent to share my personal information with:

Member of Parliament: _____

Office address: _____ Phone: _____

The enquiry relates to: _____

I understand that information will be provided to the Member of Parliament and his/her office to make enquiries on my behalf. *I understand that all personal information about me is kept in accordance with the Personal Information Protection Act 2004.*

Signature: _____ **Date:** _____

Section 3: Parliamentarian Signature Declaration

If a signature of the person providing consent is not able to be obtained:

I agree that by submitting this form I have been authorised by the above person to enquire on their behalf in relation this enquiry. I understand it is an unlawful fraudulent activity to knowingly provide false, incomplete or misleading information about the provision of consent. Written evidence of consent (such as an email) must be kept as a record and provided as part of this enquiry.

Signature: _____ **Date:** _____

Please send this completed form as part of your constituent enquiry to:

mphousingenquiries@communities.tas.gov.au