##

## Consent for Credit Report

**Reference: CLI-**

**I give Citizens Advice Watford permission to apply for an Experian Credit Report on my behalf. This credit**

**report will confirm the amount of my debts.**

**I understand that Citizens Advice Watford will pass this information to Experian for the purposes of obtaining a free credit report.**

**Name:
(Mr/Mrs/Miss/Ms) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

  **PLEASE PROVIDE A MINIMUM OF SIX YEARS OF ADDRESSES**

**PLEASE PROVIDE A MINIMUM OF SIX YEARS OF ADDRESSES**

**Current Address:**

|  |  |  |
| --- | --- | --- |
| Time at this address: Yrs\_\_\_ Mths\_\_\_\_\_ From: / / To: / /  |  |   **PostCode:**  |

**Previous Address:**

|  |  |  |
| --- | --- | --- |
| Time at this address: Yrs\_\_\_ Mths\_\_\_\_\_ From: / / To: / /  |  |   **PostCode:**  |

**Previous Address:**

|  |  |  |
| --- | --- | --- |
| Time at this address: Yrs\_\_\_ Mths\_\_\_\_\_ From: / / To: / /  |  |   **PostCode:**  |

**Previous Address:**

|  |  |  |
| --- | --- | --- |
| Time at this address: Yrs\_\_\_ Mths\_\_\_\_\_ From: / / To: / /  |  |   **PostCode:**  |