All personal information collected by Hume Community Housing ('Hume') in this Form is collected in accordance with its Privacy Policy, a copy of which can be downloaded from https://www.humehousing.com.au/privacy.html or obtained from Hume's Offices or by writing to:

The Privacy Officer
7 Hamilton Road Fairfield NSW 2165
E: hume@humehousing.com.au

1. Personal details:	
Tenant Code:	
Given Name:	
Family Name	
Date of Birth:	
Address:	
Home Telephone Number:	
Mobile Number:	
Email address:	

2. Exchange and use of my personal information:		
I consent for Hume to: ☐ Collect my personal information from the below person/s or support agency/s or partner/s. ☐ Use my personal information collected from the below person/s or support agency/s or partner/s. ☐ Disclose my personal information to the below person/s, support agency/s or partner/s.		
Name of person/support agency/partner:		
Phone:	E-mail:	
Address:		
Suburb:	State:	Postcode:
Name of person/support agency/partner:		
Phone:	E-mail:	
Address:		
Suburb:	State:	Postcode:

3. Authorise a person/agency to act on your behalf (complete this section ONLY if you are authorising someone to act on your behalf).		
Name of person/support agency/partner:		
Relationship to you		
Phone:	E-mail:	
Address:		
Suburb:	State:	Postcode:

4. Consent to provide documentation and information to a Responsible Person		
Hume is committed to supporting our customers to live independently and acknowledge that not all customers are subject to a Guardianship Order. They may have chosen for a family member or relative to have confidential information released to them by Hume as an alternative supporting mechanism to ensure the information provided by the organisation is acted upon. This person is known as a "Responsible Person". I give consent for Hume to provide information to the following Responsible Person:		
Name of person:		
Phone:	E-mail:	
Address:		
Suburb:	State:	Postcode:

The above Responsible Person will be:

- ☐ Acting on my behalf to ensure that requests are followed through
- ☐ Advisory only, I will be actioning all requests

I give consent for the above Responsible Person to receive information about:

- ☐ Financial notifications and documentations
- ☐ Notifications regarding tenancy obligations
- ☐ General information about Hume

My Responsible Person can be provided information by way of:

- ☐ Email notification and attachments
- ☐ Telephone conversation
- ☐ Mail

5. Guardian consent to exchange information (Appointed Guardian to complete)

I,_____

(Insert name of Guardian in the Guardianship Order)

Order Number: _____

on behalf of _____

(Insert name of Customer)

Will give consent to Hume Housing to speak to me in relation to the customers tenancy particularly in relation to;

- ☐ Setting up a new tenancy
- ☐ Accommodation Agreement
- ☐ Vacancy Management

I give consent for Hume Housing and the persons/agencies listed below that are relevant to 's tenancy, to exchange information that will assist in providing housing and tenancy services:

- ☐ The National Disability Insurance Agency
- ☐ The National Disability Insurance Scheme
- ☐ NDIS Plan Coordinator
- ☐ NDIS Support Coordinator
- ☐ Supported Independent Living Provider (SIL)

Matters in relation to financial management as applicable:

- ☐ Rent payments
- ☐ Rent Arrears
- ☐ Tenancy Terminations

To assist with tenancy support and household relationships, with my prior knowledge and additional verbal consent, Hume may contact:

- ☐ Social Support Network & Support Providers
- ☐ Advocate or Case Worker

I have read the collection statement on the last page of this form, have a copy of Hume's privacy Fact Sheet and give my consent on the understanding that Hume will use this permission appropriately and with due respect to the customers right to privacy.

Guardian Name: _____

Signature: _____

Date: _____

Collection Statement

When Hume collects your personal information, it must be reasonably necessary for, or directly related to your obligations as a Hume customer and the support and services we provide to you.

In addition to requesting information from you, we may also obtain information about you from third parties. Any personal information we receive from a third party is treated the same as if you provided it.

Your personal information is collected in accordance with Australian Privacy Principles - http://www.oaic.gov.au/privacy/privacy-act/australian-privacy-principles Your personal information will not be disclosed to any other person, body or agency unless you give us permission, it is authorised or required by law or it meets one of the other exceptions in the Australian Privacy Principles.

If you ever have any concerns about Hume's collection, use and disclosure of your personal information please visit www.humehousing.com.au or contact a Manager by:

Emailing: hume@humehousing.com.au

Calling: 02 9722 4300

Writing: Hume Community Housing, 7 Hamilton Road, Fairfield, NSW 2165

Acknowledgement and Consent (Customer)

I consent to the collection and disclosure of my personal information as indicated in this form.

I acknowledge that the collection, storage, use and disclosure of personal information provided by me in relation to my tenancy or application with Hume are subject to the Privacy Act 1988 (Cth) and the Australian Privacy Principles (APP).

I acknowledge that personal information provided by me in relation to my tenancy or application with Hume may be used for purposes outlined in Hume's Privacy Policy.

I acknowledge that I have read Hume's Privacy Policy.

I understand that this consent, once signed, is effective only for the period that I am a customer of Hume Community Housing, and that this consent which is ongoing, may be revoked by me, at any time, by advising Hume unless there is a legal order in place.

The personal information in this form can be used by Hume after your tenancy ends and if Hume is required to contact you, another person, support agency or partner concerning your welfare or in circumstances where you are indebted to Hume.

Full Name	
Signature of customer or guardian (Delete as appropriate)	
Date:	

Acknowledgement and Consent (other parties)

Each person, guardian, support agency or partner must provide their written permission for their personal information to be collected by the customer.

I give my permission for my personal information in this form to be collected by the customer for the provision of Hume.

Full Name	
Signature	
Date:	

Full Name	
Signature	
Date:	

Internal Use Only Hume Staff processing this information to complete

Staff Name	
Designation	
Date:	

Saved in SDM: Yes ☐ No ☐

If at any time I request to access my personal file with Hume I elect to;

Please tick option/s relevant to you

1. Consent to access personal information:

☐ I would like to access my personal information in hardcopy

☐ I would like to access my personal information in electronic copy

What kind of information do you want to access?