



# Resident Contact Consent Disclaimer



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

## I would like the following:

Daily visit – see below	
Occasional visit (please say how often you would like a visit)	
Daily reassurance call	
Weekly reassurance call (please say what day)	
No call or visit	

**I understand that if there are serious concerns about my safety and wellbeing, as a last resort a member of staff may need to gain access to my property. A card will be left advising they have entered if not at home. The information on this disclaimer will be reviewed as required.**

Signed: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Name in BLOCK CAPITALS \_\_\_\_\_

## Received by Scheme Manager

Name: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signed: \_\_\_\_\_

By ticking the below box I am allowing ateb to use my personal data to respond to this service request. My personal data will be securely held and used to fulfil the selected service request in accordance with the ateb privacy statement. Please refer to the ateb privacy statement to understand how we protect your personal data [www.atebgroup.co.uk/privacy-cookie-policy](http://www.atebgroup.co.uk/privacy-cookie-policy). For personal data queries, data access requests, amends or removal please email [mydata@atebgroup.co.uk](mailto:mydata@atebgroup.co.uk)

I agree for you to use my personal data