Information Mandate

I/We confirm that I/we give authority to my/our financial adviser noted below to act on my/our behalf and authorise Link Housing Ltd to communicate with them. I/We confirm that all relevant information required for the LIFT Open Market Shared Equity Scheme has been provided to my/our IFA and I/we confirm it is true and accurate.

Financial Adviser Name (Print) .................................................................

Company Name ..................................................................................

I/We have provided all relevant information in respect of the application for all the people who will be living in the new home.

I/We am/are aware that the application can be withdrawn at any time if Link Housing Ltd becomes aware that any information has been deliberately withheld, or false information provided.

Please sign below to confirm you have read and understood the above statements.

Applicant One .................................................................

Date ..................................................................................

Applicant Two .................................................................

Date ..................................................................................