

Department of Social Supports and Well-Being Consent Form for the Payment of Taxes and Fees

Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015)

The Department of Social Supports and Well-Being requires your consent below in accordance with section 68. (1)(b) of ATIPPA, 2015.

Furthermore, under ATIPPA, 2015: your personal information is protected in accordance with section 64.(1); you have the right to access your personal information in accordance with section 8.(1); and, you have the right to request the correction of your personal information in accordance with section 10.(1) if there has been an error or omission.

If you have any questions regarding how your personal information is collected or used, you may contact the Department's ATIPP Coordinator. Contact information for all Departmental ATIPP Coordinators is available at: www.atipp.gov.nl.ca/info/coordinators.html

Client Consent to Release and Exchange Personal Information (Please tick only 1 choice)

- ☐ **I give consent** for the Department of Social Supports and Well-Being to make payments on my behalf directly to the applicable municipality, Local Service District, Regional Service Board or other entity which charges municipal taxes and fees. This consent is effective for taxes owing as of my eligibility date for Income Support benefits (after 90 days of receiving benefits) and continues until withdrawn, or I am no longer in receipt of those benefits. If I wish to withdraw my consent, I may do so at any time by contacting or writing to my local office of the Department of Social Supports and Well-Being.
- ☐ **I do not give consent** to Department of Social Supports and Well-Being to make payments on my behalf to the applicable municipality, Local Service District, Regional Service Board or other entity which charges municipal taxes and fees.

Signature of Client (or Trustee)

Date

Signature of Spouse (if applicable)

Date

Community

File #