CONSENT FORM I/WE GIVE THE CONSENT TO THE FOLLOWING. Please initial all boxes 1. I confirm that I have been fully informed about the use of my personal information. 2. I understand that my information will only be used for the purpose of tax affairs as discussed with me and that I am free to withdraw my information at any time without giving any reason, without legal rights being affected. 3. I understand that relevant sections Tax notes and data collected during the period I engage in business with "JK STAFFING & SECURITY MANAGEMENT LTD" can be looked at by individuals from the company, from regulatory authorities, where it is relevant. I give permission for these individuals to have access to my records. 4. I understand that my records will be kept on file for a period minimum of 6 years as required by the law and will be disposed off securely at the end of the required period. Name of the Client Date Signature

Signature

Name of Person

Taking consent.

Date