

Statement of consent for the disclosure of personal records

Name/s of the person making the complaint: _____

Address of the person making the complaint: _____

Telephone number of the person making the complaint : _____

I hereby give my consent for the above named person/s to make a complaint on my behalf and for Southend Borough Council to share any relevant information in order to complete the investigation into the complaint. I understand that this is likely to include disclosure of my personal information.

Name of the service user: _____

Signature of the Service user: _____

Date: _____

Once completed, please return this consent form to:
Customer Services & Complaints Manager
Department for People
PO Box 6
Civic Centre
Southend-on-Sea
Essex SS2 6ER
Email: customerservicesofficer@southend.gov.uk