

Representative Consent form

Where possible the person affected should contact us directly, however if they are unable to do so we can deal with a representative on their behalf providing written consent is submitted.

If the person affected does not have capacity to understand or sign this form, please provide us with copies of any relevant documentation that demonstrates that is acceptable for the representative to act on their behalf (e.g. Power of Attorney)

If you are unsure about anything in this form, please contact us for guidance.

Please have the affected person read the following information or if they are unable to, read it aloud to them. They must be able to sign the declaration.

Purpose of this form

There are two forms of consent that this form covers:

- Consent to act for the named representative to act on your behalf during the investigation into your complaint
- Consent to share your personal information, that is relevant to the investigation, with the named representative

Your rights

You have the right to withdraw consent at any time, please contact us as soon as possible to let us know.

The processing of your personal data is carried out in accordance with the General Data Protection Regulations (GDPR) and the Data Protection Act 2018. For further information on how we protect your privacy please visit

www.somersetwestandtaunton.gov.uk/privacy-and-security

If you have any concerns or questions, please do not hesitate to contact us.

Your details

This section relates to the details of the affected person.

Full name	
Address	

Representative details

Full name	
Address	
Telephone number(s)	
Email address	
Relationship to affected person	

Declaration

By signing below, I give my permission for the named representative to act on my behalf in making a complaint to Somerset West and Taunton Council. I also give permission for Somerset West and Taunton Council to share my personal information with the named representative if it is relevant to the complaint.

Signature	
Date	