

## **Complaints**

## Consent to act on behalf of a customer

NAME:

(Capital letters)	
ADDRESS:	
TELEPHONE NUMBER:	
NATURE OF COMPLAINT:	
Consent:	
I give the individual/organisation named below consent to make the above complaint on my behalf and I understand that information relating to my complaint will be shared with them for the purposes of dealing with my complaint.	
SIGNATURE:	
DATE:	
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Details of Third Party:	
Signature:	Date:
Full name (in capital letters)	Organisation/Address:
Relationship with customer (if any)	
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Telephone no:	Email address:
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