

## Victims Services Department of Communities and Justice

## **Client consent for representative** to make a complaint on their behalf

I, (name of client)

hereby authorise Victims Services to access my personal information for the purpose of handling my complaint related to:

- my claim with Victims Services (claim number)
- my Charter Complaint against (name of agency)

I have consented to (name of authorised representative) making the complaint on my behalf.

Please chose ONE of the following options below:

I would like correspondence regarding the complaint to be sent to myself only OR

I would like correspondence regarding the complaint to be sent to myself and my authorised representative listed above OR

I would like all correspondence regarding the complaint to be sent to my authorised representative only

I have included a copy of my signed (proof of identity)

as proof of my identity. (Note: Proof of licence, photo card.	identity must include a signature. E	xamples include passport, drivers
Signature of client	Date (dd/mm/yyyy)	(VS • 11/2020)