

# Authority to Discuss

Fill in this form if you would like someone else to make enquiries on your behalf regarding Housing/Council Tax benefit and Council Tax accounts.

The nominated person can only make enquiries and will not be authorised to sign or act on your behalf.

This authority will only be valid for the duration of your current claim.

## Nominee Form

Name: .....

Address: .....

.....

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Name of Nominated person:.....

Address of Nominated person:.....

.....

.....

I may want to cancel this arrangement at any time by notifying you in writing.

Signed (*Customer/Claimant*) ..... Date .....

Signed (*Nominated person*) ..... Date .....

**Revenues & Benefits Department**  
PO Box 187, Ellesmere Port, CH34 9DB  
**Tel: 0300 123 7021**  
**benefits@cheshirewestandchester.gov.uk**

