



# EPPING TOWN COUNCIL

EPPING HALL, ST JOHNS RD, EPPING, ESSEX CM16 5JU

## Application request for Key for the Changing Places Facilities in Epping

I confirm that I have been trained in the use of equipment inside the Changing Place facility and that I have read and understood the guidance.

Carer's Name (please print).....

Signed .....

Date.....

Carer's Address.....

.....

Carer's email Address .....

Carer's Telephone .....

User's Name (please print).....

Signed on behalf of the user.....

Date.....

User's Address.....

.....

Please indicate that you give consent for your benefit information to be held by Epping Town Council. YES / NO

Which address should the Changing Places Key be sent to: USER / CARER

This form can be completed and submitted electronically or printed off and returned to:

FAO Town Clerk,  
Epping Hall,  
St John's Road  
Epping CM16 5JU  
Email: [info@eppingtowncouncil.gov.uk](mailto:info@eppingtowncouncil.gov.uk)

