



## Application request for key to the Changing Places facilities Harlow Bus Station and Pets' Corner

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

## Carer's details

Name	
Telephone number	
Address	
Signature	
Date	
User's details	
Name	
Address	
Signature	
Date	
Do you give consent for your benefit information to be held by Harlow Council?	
Yes No	
Which address should the Changing Places key be sent to?	
User Carer	
Please return your completed form, along with evidence of the Disability Living Allowance (higher rate mobility component) to:	

Michael Kelly
Bus Station Supervisor
Harlow Council
Civic Centre
The Water Gardens
Harlow
Essex
CM20 1WG