

MEMBER CODE OF CONDUCT – ALLEGED BREACHES Complaint Form

1. **Your Details** [*items marked* * *must be completed* – *anonymous complaints will not be considered*] *Please also note that you should have no expectation that your identity will not be revealed.*

Title*:	
First name*:	
Last name*:	
Address*:	
Daytime telephone*:	
Evening telephone*:	
Mobile telephone:	
Email address*:	

2. Which complainant type best describes you*?

- Member of the public
- An elected or co-opted member of an authority
- Member of Parliament
- Local authority Monitoring Officer
- Other council officer or authority employee
- Other (please give details)

3. Please provide us with the name of the councillor you believe has breached the Code of Conduct and the name of their council/authority:

Title	First name	Last name	Council or authority name

4. Please explain in this section what the councillor has done that you believe breaches the Code of Conduct. Continue on a separate sheet if there is not enough space on this form.

It is important that you provide all the information you wish to have taken into account by the Monitoring Officer when she (acting in consultation with the Independent Person) decides whether to take any action on your complaint. For example:

- You should be specific about exactly what you are alleging the councillor said or did. For instance, instead of writing that the councillor has conducted himself in a manner which could reasonably be regarded as bringing his office or the authority into disrepute, you should state what it was they said or did.
- You should provide the dates of the alleged incidents wherever possible.
- You should confirm whether there were any witnesses to the alleged conduct and provide their names and contact details if possible.
- You should provide any relevant background information.

Please provide the details of your complaint.

5. **Remedy Sought**

Print			_
name*:			
name .			

Date:

By ticking the box below I am confirming that I have completed the form to the best of my knowledge and have read and understood the terms and conditions

In the interests of fairness and natural justice, the councillor complained of, will be told that a complaint has been made against him/her and your name. The councillor will be provided with a summary of the complaint. You should have no expectation that your identity will not be revealed.

Please email this form to MonitoringOfficer@dartford.gov.uk

DATA PROTECTION - We will use the personal information you give us to administer our complaints process into alleged breaches of the Member Code of Conduct by elected councillors and co-opted members.

Our **lawful bases** for processing your personal information are:

- our legal obligation(s) under the Localism Act 2011
- necessary for the performance of a task in the public interest or in the exercise of official authority vested in the Data Controller (under the above legislation)

Some of the information that is collected is classified as **special category personal data** and/or personal data consisting of **criminal convictions and offences (including alleged offences)**. This is processed for reasons of substantial public interest under the law that applies to us (see above) where this helps to meet our broader social obligations such as where it is necessary for us to fulfil our legal obligations and regulatory requirements. We have a Data Policy that sets out how this information will be handled.

Dartford Borough Council, Civic Centre, Home Gardens, Dartford, Kent DA1 1DR is the Data Controller <u>dataprotection@dartford.gov.uk</u>

Please refer to our Corporate Privacy Notice and the Privacy Notice for Member Code of Conduct Complaints at <u>www.dartford.gov.uk</u> for further details on how we process your personal information and your rights.

Complaints Form – Monitoring Information

In order to ensure we target our services in the most effective way for our community, we would appreciate if it you would give answers to the following questions:

Q1.	Ethnic Group		16-19
	White:		20-24
	British		25-59
i :	Irish		60-64
	Any other white background		65 and above
	Black or black British: Caribbean		
	African	Q5.	<u>Do you have a disability?</u>
	Any other black background		<u> </u>
			Yes
	Asian or Asian British: Indian		No
	Pakistani	Q6.	What is the nature of your
	Bangladeshi		<u>disability?</u>
	Any other Asian background		Difficulty getting around
Q2.	Sex		Mental health problems
QL.			Learning difficulty
	Male		Difficulty seeing
	Female		Hearing difficulty
Q3.	Partnership Status		Other
	Single	Q7.	To help us monitor issues for
	Married/Civil Partner		different sections of our
	Separated		community, we would appreciate it if you would tell us which faith
	Divorced		group, if any, you belong to. If lack
	Widow/Widower		of faith is an issue in itself we
			would also like to know.
Q4.	Age Group		
	Under 16		

IMPORTANT: If you wish to save this form use the following steps: Select "**Print**" then select "**Print as PDF**". NOT USING "**Print as PDF**" will result in a blank form being saved. email it to us at: monitoring.officer@dartford.gov.uk