

Church Elm Lane Medical Practice
Church Elm Lane • Dagenham • Essex • RM10 9RR

## **REQUEST FOR PRIVATE LETTER**

Name of patient who the letter is concerning: .....

| Date of Birth:   |
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| Address: Postcode:   |
| Contact Number:  |
| To whom should the letter be addressed to:   |
| Name of person requesting the letter (if different from above):  |
| Signature of patient/person requesting the letter:   |
| DESCRIPTION OF LETTER:   |
| Please include any additional information required to be included in the letter.   |
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| PLEASE NOTE:   |
| <ul> <li>Private letters will incur a charge and will depend on the type of letter. Minimum fee for a letter<br/>is £50. Any amendments or copies may incur an additional charge.</li> </ul> |
| <ul> <li>You may be asked to come in by making an appointment to discuss the letter in person or on<br/>the phone before the letter can be completed.</li> </ul>                             |
| <ul> <li>Once you put in your request, we will contact you regarding the fee and date of collection of<br/>your letter.</li> </ul>   |
| <ul> <li>Please leave 8-10 working days for your collection date since it is non-NHS work and will be<br/>outside of GP's working time.</li> </ul>   |
| Admin use only:  |
| GP Name:   |
| Comments:  |