

BERKS COUNTY

REQUEST FOR ALTERNATE COMMUNICATION

1. Client Name: _____
2. Date of Birth: _____

I understand that I have the right to request that Berks County communicate confidential information to me by methods and at locations that will assure my privacy. I also understand that the County will comply with my reasonable requests for such accommodation.

The County normally communicates confidential information to clients by written correspondence to the home address or by telephone to the client's home or office.

1. Describe the alternative method you would prefer for confidential communications from the County.

2. Identify the alternative location(s) at which you would prefer to receive confidential communications from the County (post office box, friend's home, etc.).
