

Attachment 2

Confirmation of contact details

Local Council Name: CAPEL-LE-FERNE PARISH COUNCIL

Please confirm the contact details for the Clerk, RFO (if applicable), and Chair to assist us in ensuring that our records are kept up to date.

Clerk name: MAUREEN LEPPARD	RFO name (if different to clerk)	Chair name: PHILIPPA SEAGER
Clerk working hours (so we know when we can ring) 9AM – 5PM	Clerk working hours (so we know when we can ring)	
Is this person the primary contact: YES	Is this person the primary contact:	
Parish Council registered address: Email: clerkcapellefernepc@btinternet.com Postal address: 39 VICTORIA ROAD CAPEL-LE-FERNE FOLKESTONE KENT CT18 7LT	Parish Council registered address:	Chair contact postal and email address Email: philippa.seager@foredia.com Postal address: 146 CAPEL STREET CAPEL-LE-FERNE FOLKESTONE KENT CT18 7HA
Telephone: Primary contact number: 01303 259564 Mobile/alternative number: 07813704142	Telephone: Primary contact number: Mobile/alternative number:	Telephone: Primary contact number: 01303 245254 Mobile/alternative number: 07903 625573
Email address (please do not provide a personal email unless the Clerk/RFO does not have a Council/Meeting email) clerkcapellefernepc@btinternet.com		