



Anti-Social Behaviour Reporting Form

* - please delete as appropriate

** - mediation is provided by an independent organisation

Your Details

Title * : Mr / Ms / Miss / Mrs / Dr / Other :

Forename(s): **Surname(s):**

Address:

Are You * : A Granta tenant / Another tenant / Owner occupier / Other :

What is the best way for us to contact you? (please give details of 1 or more methods of contact)

Tel. (Home): Tel. (Work): Tel. (Mob):

Letter to home : Yes / No * Email :

Details Of The Person Causing The Nuisance Or Anti-Social Behaviour

Title * : Mr / Ms / Miss / Mrs / Dr / Other :

Forename(s): **Surname(s):**

Address:

Anything else we should know?

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Details Of The Complaint

Date & Time of Incident	Duration of Incident	Description of Incident	Effect on You	Witness Details

Details Of The Complaint (continued)

Who else have you involved?

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What have you done so far?

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Have you spoken to the person causing the problem? Yes / No *

Further Action

What would you like us to do?

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Would you consider mediation ** in this case if appropriate? Yes / No *

If this case goes to court, are you prepared to be a witness? Yes / No *

Do you have a crime reference number? Yes / No *

Anything Else

Please tell us anything else you think is relevant?

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PLEASE NOTE THAT ALL INFORMATION SUPPLIED WILL BE HELD CONFIDENTIALLY IN ACCORDANCE WITH THE PROVISIONS OF THE DATA PROTECTION ACT 1998 AND YOUR DETAILS WILL NEVER BE GIVEN TO THE PERSON CAUSING THE PROBLEM.

THE INFORMATION YOU SUPPLY MAY BE USED FOR THE PREVENTION AND DETECTION OF CRIME.