



Requesting an Anti-Social Behaviour Review

How did you hear about the ASB Case Review?

I am the victim and have made 3 complaints regarding the same issue of anti-social behaviour in the previous 6 months, which was reported within one month of it occurring to the police, council or registered social landlord.

Name of applicant:

Address:

Date of Birth:

Telephone number:

Email address:

If you are making this request on behalf of another person please complete the section below:

Name of person on whose behalf this application is made:

Their address:

Their telephone number:

Their telephone number:

Their email address:

Relationship to applicant e.g. relative, carer, local councillor:

Does this person know that you have made the request for an ASB review?

I am representing a group of individuals (or a community) who have made 3 complaints regarding the same issue of anti-social behaviour in the previous 6 months, which was reported within one month of it occurring to the police, council or registered social landlord. The local authority will correspond directly with this person in relation to the ASB Case Review request and outcome.

Name of applicant (group representative):

Address:

Date of Birth:

Telephone number:

Email address:

In order for us to decide if you meet the threshold for an ASB review we need to have details of the incidents that you or as a group/community have reported (there must be at least 3). Please complete the form below:

Name, address and date of birth of the person who made the report.	Date of incident.	Description of ASB.	How did this cause you harassment, alarm or distress?	Who did you report this to? <i>If you reported to more than one organisation please tell us about them all and provide any reference numbers or incident numbers provided to you</i>	The date on which it was reported (this must be within 1 month of the incident)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Consent: In order to proceed with the ASB Case Review, all individuals detailed above must be willing for us to share information with partner agencies in order to resolve the problems. If all individuals do not give consent to share information, we cannot progress the ASB Case Review.

Consent Given by all individuals listed above Yes No

Where consent is not given, information provided will be recorded and no action taken.

Would you be willing to provide a written account of the effect the anti-social behaviour has had on you (or the community), to be read on your behalf at the review, or alternatively attend the first part of the review?

What are you hoping for from this review?

Have you made a formal complaint through the Complaints Procedure of the organisation? Yes No

If so, to which agency have you made the complaint?

Your information will be processed in accordance with the law, in particular the Data Protection Act 1998. The information you provide will only be used for Council purposes unless we are required by law to do otherwise.