

# ANTI-SOCIAL BEHAVIOUR INITIAL REPORTING INCIDENT

## COMPLAINANT DETAILS

Name of Complainant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Tel No: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Ethnic Origin Of Complainant: \_\_\_\_\_

(as described by her/himself)

Is the Complainant a St Peter's tenant? \_\_\_\_\_

Is an Interpreter Needed? YES/NO

If so which language? \_\_\_\_\_

**DESCRIPTION OF INCIDENT(S)** (to include date(s), time(s) and place(s) wherever possible)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PERPETRATOR DETAILS

Is the Identity of the Perpetrators Known to the Complainant? YES/NO

(record details where known)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name of Staff Member taking this complaint: \_\_\_\_\_

Passed To \_\_\_\_\_

Dated \_\_\_\_\_

Actioned by Housing Manager: \_\_\_\_\_