

Initial Anti-Social Behaviour Report (taken by telephone or in person)

1. Complainant	2. Main Perpetrator
Full Name:	Full Name:
Address:	Address:
Telephone Number:	Telephone Number:
Please answer YES or NO: Are you a Horton/Chartford Housing tenant?	Is the above a Horton/Chartford Housing tenant?
If Yes, please tell us the name of your support worker or housing officer	Support Worker/Housing Officer Name:
3. Date of Incident:	Time of Incident:
Description of incident/problem:	
Do any incidents involve Racial Abuse or Harassment?	
If yes to the above, name of perpetrators (if any) :	
Name and address of other witnesses (if any) :	
Please answer YES or NO: Have you spoken to anyone else about your complaint e.g. have you spoken to the Police or other agency?	
If YES, please tell us who and which agency?	
If you have reported your concerns to the Police, please provide details of the crime reference number?	

To be completed by member of staff taking this complaint

Date complaint passed to Sue Atkinson, Services Director _____