

Ref No.	

PART A - INITIAL COMPLAINT

How	Time	Date	Place /	Place / Telephone				
complaint received	By whom							
	Mr/Mrs/Miss/Other:		Occupation:					
Complainant	Forenames :		-					
	Surname:		D.O.B.	.: P.O.B.:				
	Address:		Ethnic	Origin	White □ Asian □		Black □ Other □	
			Teleph	Telephone - Work:				
		Postcode:	Teleph	elephone - Home:				
			1					
	Time:	Date:	Place:					
	Name of party and	nature of complaint/i	incident:					
Nature								
and Details of Complaint /								
incident								
	Signature of Complainant:							
Can this complaint be informally resolved at source:			If YES proceed to Part B.					
YES / NO				If NO proceed to Part C to be completed				

PART B – INFORMAL RESOLUTION

I have had the informal procedure explained to me and wish my complaint to be resolved in this way:					
1	Not serious.				
	Satisified with the explanation given,	or an apology if a	orga	oriate.	
	May be resolved informally	,			
Со	mplainant's signature:			Date:	
1.	Complainants views obtained	YES / NO	6.	Given advice	YES / NO
2.	Advised complainant of intention to		7.	Meeting arranged between compla	inant
	•	YES / NO		and	
		YES NO	8.	•	YES /NO
4.	Acquainted with details of complaint			Date:	
_		YES / NO	9.	Explanation offered to complainant	
5.	Admitted substance of allegations	YES / NO	10.	Complainant accepts that no furthe action will be taken	YES / NO
	(see below)	TES / INO		action will be taken	TES / NO
Ex	planation (to be completed by reporti	ng Constable).			
Ad	ditional remarks, if any, in relation to	informal resolution	n:		
	, , , , , , , , , , , , , , , , , , , ,				
Со	nstable / Dean signature:	<u></u>	<u></u>	Date:	

NOTES: NO WRITTEN STATEMENTS NEED BE OBTAINED IF THE MATTER IS INFORMALLY RESOLVED.

PART C - FORMAL COMPLAINT

Additional details of complaint:	Form to be hand written
Complainant's signature: Date:	
Complainant 5 Signature	

ΡΔ	RT	D -	- R	FΡ	n	RT

To be completed where complaint has been informally resolved - otherwise write initial action & comment (if relevant include details of witnessed other officers).

Signature: Name:		Form to be hand writter
Signature:		
ignature:		
Signature:		
ignature:		
signature:		
ignature:		
gnature:		
ignature:		
gnature:		
ignature:		
ignature:Name:		
ignature:		
ignature:Name:		
ignature:		
ignature:Name:		
ignature:		
of reporting Constable/Dean)	Signature:	Name:
	(of reporting Constable/Dean)	. Italiic.