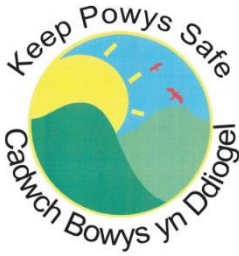


REMEMBER – If you are applying for the Community Trigger on behalf of someone else who has been affected by anti-social behaviour, their individual written consent must also be provided. The Community Trigger application will **not** be processed until their consent has been received.



Powys Community Safety Partnership

Community Trigger Application

(Section 104, ASB Crime & Police Act 2014)

1. Why are you making a Community Trigger application for an Anti-Social Behaviour (ASB) Case Review?

Please ensure that you meet the Community Trigger threshold, detailed in the Guidance Notes that accompany this application form.

- (a) I am the person affected by the anti-social behaviour (ASB) and have made three or more qualifying complaints (Go to Q3).
- (b) I am acting on behalf of the person affected by the ASB, who has made three or more qualifying complaints (Go to Q2).
- (c) I am one of five or more people affected by the ASB, who have all made qualifying complaints (Go to Q3).
- (d) I am acting on behalf of five or more people affected by the ASB, who have all made qualifying complaints (Go to Q2).

2. Advocate Details (Required if 1b or 1d ticked) If you are acting on behaviour of someone else, complete your details then go to Q3.

Name	
Address	
Daytime Phone No.	
Mobile Phone No.	
E-mail	
Relationship to person affected by ASB	

3. Details of the person(s) affected by the anti-social behaviour

Name	
Address	
Daytime Phone No.	
Mobile Phone No.	
E-mail	

Name	
Address	

We welcome the opportunity to review cases of anti-social behaviour, but Community Trigger applications may be rejected if they are thought to be prejudicial, discriminatory, malicious, unreasonable or vexatious.

REMEMBER – If you are applying for the Community Trigger on behalf of someone else who has been affected by anti-social behaviour, their individual written consent must also be provided. The Community Trigger application will **not** be processed until their consent has been received.

Daytime Phone No.	
Mobile Phone No.	
E-mail	

4. Briefly describe the type of anti-social behaviour you have been experiencing.

Individual incidents are to be detailed at Q5.

5. Please provide details of the anti-social behaviour incidents – who reported the incidents; when they were reported; who they were report to and how:-

Incident Date	
Incident Details (What happened?)	
Reported By	
Date Reported	
Agency Reported To	
How Reported (e.g. phone)	

Incident Date	
Incident Details (What happened?)	
Reported By	
Date Reported	
Agency Reported To	
How Reported (e.g. phone)	

Incident Date	
Incident Details (What happened?)	
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How Reported (e.g. phone)	
---------------------------	--

6. How has the anti-social behaviour affected you / the person you are acting on behalf of?

7. What action has been taken, to your knowledge?

8. What further action are you hoping for?

9. Have you any special circumstances that we need to take into consideration? If so, please provide details.

10. Please provide any other information relevant to your Community Trigger application.

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SIGNATURE:-

I confirm that the information given in this Community Trigger Application is correct to the best of my knowledge and belief *Please tick to confirm*

In order to undertake an Anti-Social Behaviour Case Review we need to share information. Full information about how we will share information is detailed within the Guidance Notes of the Community Trigger Application Form.

By requesting that an Anti-Social Behaviour Case Review is undertaken, I given my consent for relevant partner agencies to share information *Please tick to confirm*

Return completed form to:-

Powys Community Safety Partnership
First Floor
The Gwalia
Ithon Road
Llandrindod Wells
Powys
LD1 6AA

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