

# Anti-Social Behaviour (ASB) Case Review

# Appeal Application Form

Please read the OPCC Anti-Social Behaviour Case Review Appeals Procedure prior to completing this form.

## **Applicant Details**

|  |  |
| --- | --- |
| Title |  |
| First Name(s) |  |
| Last Name |  |
| Home address & Postcode |  |
| Email Address |  |
| Phone Number |  |

## **Victim Details (if different to applicant)**

|  |  |
| --- | --- |
| Title |  |
| First Name(s) |  |
| Last Name |  |
| Home address & Postcode |  |
| Email Address |  |
| Phone Number |  |

**Note**: an appeal can be made by the victim or another person acting on their behalf. If you are acting as an advocate on behalf of somebody else, a signed consent letter (or copy of Power of Attorney for Health and Welfare) should be submitted along with this appeal application.

## **ASB Case Review Details**

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| --- | --- |
| Address/location relevant to the ASB |  |

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| To which Local Authority did you apply for an ASB Case Review? |
|  |
| On what date did you apply for the case review? |  |

## **Appeal Grounds**

A victim of anti-social behaviour (or another person acting on their behalf with their consent) can make an appeal in relation to an ASB Case Review if they are dissatisfied with:

1. the decision by the relevant bodies on whether the threshold for a Case Review was met *(i.e. the application was declined on the basis the threshold was not met),* **or**
2. the way in which the case review has been carried out by the relevant bodies

An appeal cannot be requested solely on the grounds that the victim was dissatisfied with the outcome of an ASB Case Review.

Where the applicant is dissatisfied with the delivery of an action plan which has been produced as part of a case review, or is unhappy that a particular enforcement tool or power has not been implemented, this should be raised with the district/borough council single point of contact (SPOC) for that case.

**Type 1 appeal (application declined)**

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| --- | --- |
| Are you appealing against a decision to decline your request for an ASB Case Review? (Type 1 appeal)  | Yes / No |
| If yes, please state what date you received notice that your application for a case review had been declined. |   |

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| Please provide details of the incidents of anti-social behaviour you previously reported in relation to your application for a case review. Please include the dates the incidents took place, the date the incidents were reported and to which agency.  |
| Date incident took place | Date incident reported | Agency incident reported to |
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**Type 2 appeal (case review process unsatisfactory)**

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| Are you appealing because you are dissatisfied with the way in which your ASB Case Review was carried out? (Type 2 appeal) | Yes / No |
| If yes, please state the date you received the outcome of the case review. |  |

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| With regard to **the way in which your anti-social behaviour case review was carried** **out**, please explain what aspect(s) you are dissatisfied with and why?  |
|  |

**Please Note the following:**

* When the OPCC receives your appeal it will need to obtain information relevant to your case from the relevant bodies in order to consider your appeal. By submitting your appeal application you are consenting for the OPCC to request information about your case from the relevant bodies and for that information to be supplied to the OPCC by them.
* Please DO NOT send large amounts of documents along with the appeal application form. Additional information is not required at this stage. The OPCC will consider the contents of the appeal application and contact you if further information is required.

Please return your completed appeal form as follows:

|  |  |
| --- | --- |
| By email to  | opcc@warwickshire.police.uk  |
| By writing to | Office of the Police and Crime Commissioner for WarwickshireWarwickshire Police HeadquartersPO Box 4Leek WoottonWarwickshireCV35 7QB |
| For any queries please call OPCC Warwickshire on 01926 733523 |