



**Anti-Social Behaviour Incident Diary**

Dear Complainant

Thank you for contacting Milton Keynes City Council with your report of Anti-Social Behaviour. We are very sorry to hear you have been impacted by local problems, but rest assured, we will do all we can to help you.

Enclosed is a copy of incident diaries. To help us manage your case effectively, you are required to record your reports and send any completed diaries to us. You can do this by email or post.

Your reports should be made to us every 2 weeks, unless there is a threat of harm to any member of your household or a visitor. In this scenario, you should contact us as soon as you are able to. If a police response is required, you should *always* call 999 (emergency) or 101 (non-emergency).

Your report should include as much detail as possible. This includes date and time of incidents, who and what you saw, providing a detailed description and any names (if known) of the offenders, and importantly, how the incident made you feel.

Your case will be triaged to either your housing officer or a specialist Anti-social Behaviour Officer. You are entitled to know who will be managing your case and how you can contact them.

Milton Keynes City Council has made a series of promises to victims of anti-social behaviour through our **Victims Code**, which you will find enclosed.

If you do not submit any incident diaries for 4 weeks or more, your case may be closed down on the basis the problems you have experienced may no longer be happening.

If you have any questions regarding your case, please speak to your housing officer or ASB Officer who will be able to help you.

We thank you again for having the courage to make your report and we hope we can resolve the matter for you.

When you have completed your Incident Diary, please send to: ASB@MILTON-KEYNES.GOV.UK

Yours Sincerely,

Milton Keynes City Council

**The Victims Code**

Milton Keynes City Council has its own **Victims Code** for victims of anti-social behaviour.

The Code is as follows:

**Code 1: To be able to understand and to be understood.**

You have the Right to be given information in a way that is easy to understand and to be provided with help to be understood, and where necessary, access to interpretation and translation services.

 **Code 2: To have the details of your report recorded without delay.**

You have the Right to have details of your report recorded by Milton Keynes City Council when you make your report to us and be responded to in accordance with our service standards. You should feel encouraged to report instances of anti-social behaviour to us and for your report to be taken seriously.

**Code 3: To be provided with information when making your report.**

You have the Right to be provided with information about the standard process of a case, what might happen and what you will need to do to ensure incidents can be investigated timely and without delay. This information will be made available to you upon the opening of your case.

**Code 4: To access support services for victims.**

You have the Right to be referred to services that support victims, which includes the Right to contact them directly and to have your needs assessed so services and support can be tailored to meet your needs. You have the Right to access external support services, such as Victim Support (if eligible) and to have victim support measures explained to you. If you are required to give evidence in court, for example, we may be able to apply for special measures where witnesses can give evidence behind a screen or via video-link. If you are required to provide a statement or attend an appointment with us, you have the Right to bring a support worker, friend or relative with you.

**Code 5: To be informed about the investigation of your case.**

You have the Right to know who is managing your case and how you can contact them. You have the Right to regular contact with your case officer in line with our service standards. You have the Right to be provided with updates on your case and be informed when important decisions are being made.

**Code 6: To have a review of your case be carried out.**

If you are not satisfied with the outcome or the progression of your case, you have the Right for your case to be reviewed by a senior manager. At the conclusion of this review, you have the Right to be informed of any advice and recommendations in support of the case.

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

**CONSENT TO DISCLOSURE OF INFORMATION**

I *(name)*

*(address)*

have made a complaint about anti-social behaviour to

I understand that I may withdraw my consent at any time, by informing the above agency in writing.

I understand that I will be able to read any statement produced by an official of the above agency as a result of information supplied in these diary sheets. I also understand that **only if I** provide a statement, my name would be disclosed to the perpetrator(s) should the case go to court.

I am /am not willing to attend court if required\* (please delete)…………….…………………..

I am willing to have my details used by other agencies involved in the investigation.…………

\*(Please state reasons for not attending court on page 15 of this booklet)

We need your help to resolve the problem you are experiencing.

As part of their investigation I consent to officers or agents of

using the information contained within these diary sheets in both civil and criminal court cases.

**Signature:**………………………………………………………..

**Print Name:**……………………………………………………...

**Date:**……/……/…………

**Restricted Document**



SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\* MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

We will not disclose your identity to the person(s) you are complaining about, without your written consent. However any information given on this form may be given to the offender(s) if the case goes to court.

Please supply your name and address on the front sheet of this booklet. You do not have to give your details, but if you do not, we will be unable to invite you to make a witness statement/go to court. This will mean that the information you give us will not carry as much weight. It will also limit the actions we can take to help you.

Date: Time Started: Time Finished:

Location:

Suspects Names / Descriptions:

Details Of Incident:

Did you take any action?

Any other supporting evidence (Video/Photographs etc.)

How did the incident affect you?

 Date Completed:

**Have you reported the problems to anyone else?** **Yes / No**

Please tick as appropriate:

Police\*  MK Council  Housing Provider 

Other (Please specify)

 \*Please quote URN or crime number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

Please use this page to provide a brief summary of how the behaviour highlighted in these diary sheets has affected your quality of life.

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..…………………………………………………………………………………………………

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS LOG SHEET**

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

Please use this page to provide a brief summary of how the behaviour highlighted in these diary sheets has affected your quality of life.

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..………………………………………………………………..…………………………………………………………………………………………………

SEND COMPLETED DIARY SHEETS TO ASB@MILTON-KEYNES.GOV.UK

**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**

**Allocated Investigating Officer**

**Name:**…………………………………**……………………….**

**Your Telephone Number:** ……………………………………………………….

**Your Email Address:** ……………………………………………………………

**Useful Contacts**

**Thames Valley Police (non-emergency) - 101**

**MK Housing Services - 01908 252937**

**Noise - Environmental Health - 01908 252398**

**Noise Complaints (Out of Hours) - 01908 226699**



**ANTI-SOCIAL BEHAVIOUR INCIDENT DIARY**