

Partnership Information Form

Remember to always call 999 if the crime is being committed now, the offender is nearby, or if you or a Person, Child or Young Person is at immediate risk of harm in danger.

Alternatively, you can call 101 and speak directly with a call handler or use our live chat service for general enquiries and advice as well as reporting <u>non-urgent</u> incidents or crimes. Please note the 101 Live chat service is not monitored 24/7. The purpose of this form is to share information NOT to report a crime.

This form should be used by partner agencies to share information with the police which has been gathered during the course of their work and may be of interest to law enforcement. It can be used to share information regarding potential criminal offences, conduct or behaviour, including, but not limited to; exploitation (sexual, criminal, labour etc.), serious and organised crime (including terrorism, drug supply, use of firearms etc.) and community tensions and issues. The information will be recorded on the Police Intelligence System and used to support activity by the police and, where appropriate, partner agencies.

The Information should be specific to a particular person, vehicle, or incident. i.e. one report per event and information relating to separate events should be on their own form. The submission of the information should be timely to the event.

Please provide as much detail as possible regarding names / nicknames / dates of birth / descriptions / vehicle details / addresses - which should include residence if known, location of incident, school / college / workplace attended etc.

Please be assured the information you provide is strictly managed and your details will not be incorporated in any subsequent intelligence reports.

Have you made any other referrals or reports to any other agency regarding this or associated matters? (e.g., Adult / Child's Social Care, Youth Justice Service, Health, Education)

If YES, please state which agency:

Section 1: Your Details						
Full name:		Date of birth:				
Job title: Organis		ation:				
ddress:						
Telephone:	Email:					

The following sections of the form must be completed otherwise we will be unable to process the information.

Section 2: The information is from my own observations enter:								
Yes Go to Section 4								
No Go to Section 3								
Section 3		Data - Chi	a la					
Full name:	Date of birth:							
Address:								
Telephone:								
If the information is from a 3 rd party would they be willing to engage with the Police?: SELECT								
Other Partner (please state)?:								
Section 4: Information Validation								
The source of this information is SELECT								
The information is Select								
The information can be SELECT								
Date you received the information:								
ARE THEY AWARE THAT THIS INFORMATION IS BEING SHARED TO POLICE AND MAY BE ACTED UPON? SELECT								
Section 5: Who is involved – (enter more as required) (Do not use initials / pseudonyms, make sure each								
nominal is clearly identifiable. Full name:		Aliac/Nick	vnamo:					
ruii ilailie.		Alias/Nickname: Telephone numbers / WhatsApp		Ann/social				
Date of birth:	Gender:	media usernames etc:		Дрр/зосіаі				
Address:								
Description and clothing:								
Full name:	ull name:			Alias/Nickname:				
Date of birth:	Gender:	Telephone numbers / WhatsApp/soci media usernames etc:		App/social				
Address:								
Description and clothing:								
1								
Full name:		Alias/Nickname:						
Date of birth:	Gender:	1	Telephone numbers / WhatsApp/social media usernames etc:					
Address:								
Description and clothing:								
Becompared and distantly.								
Full name:		Alias/Nick	kname:					
Date of birth:	Gender:		Telephone numbers / WhatsApp/social media usernames etc:					
Address:								
Description and clothing:								

Vehicle(s) involved (Use Information Section for further vehicle information)							
Registration:	Make:	Model:	Colour:				
Identifying features:							
Registration:	Make:	Model:	Colour:				
Identifying features:							
Location(s) involved (Provide specific addresses or identifiable locations)							
Section 6: INFORMATION (what they, or you know, or have been told, please give a brief specific summary of							
the <u>relevant</u> information including any specific risks. Do not name the source of the information in this section)							

Once complete please submit to force.intelligence@durham.police.uk

Please note our Force Intelligence Bureau is only manned between the hours of 07:30-16:30 Monday-Friday