Anti-Social Behaviour Complaint Form

Strictly confidential

This form is also available in large print.

Comhairle Chontae na Gaillimhe
Galway County Council

Complainant details

Name			
Address			
Telephone		**Email**	

Person(s) about whom the complaint is being made

Name	
Address	

Nature of complaint (list specific incidents including location, times, dates, other witnesses etc., as detailed as possible

Reporting details

Reported to Gardaí	**Yes**		**No**		**Garda station**	
Name of Garda						

Declaration

I hereby declare that he foregoing information I have supplied to Galway County Council is truthful and accurate.

Signature		**Date**	

Return completed form to Housing Unit Galway County Council County Hall Prospect Hill Galway	✆ (091) 509300 🖷 (091) 509299 housing@galwaycoco.ie www.galway.ie