

Royal Ulster Constabulary

THE POLICE [NORTHERN IRELAND] ORDER 1987
REFERRAL OF COMPLAINT TO INDEPENDENT COMMISSION FOR POLICE COMPLAINTS

Tick as appropriate [] Delete as appropriate

1.	Reference Number	B147/B45 88 97 DIS / /88	
2.	Previous references to Commission	None <input type="checkbox"/>	Article 8 Referral of Incident) include Commission reference if known
3.	Reason for Reference	Article 7 <input checked="" type="checkbox"/> Article 8(1) <input type="checkbox"/>	
4.	Name and Address of Complainant [if any]	See Form 17/2 <input checked="" type="checkbox"/>	
5.	Name and Address of Injured Party [if different]	See Form 17/2 <input checked="" type="checkbox"/> See [statement of] [report of] <input type="checkbox"/> [complaint] [letter] <input type="checkbox"/> [Inspector] [Sergeant] <input type="checkbox"/>	
6.	Date of Complaint [if any]	See Form 17/2 <input checked="" type="checkbox"/>	
7.	Date and time of Incident	See Form 17/2 <input checked="" type="checkbox"/>	
8.	Location of Incident	See Form 17/2 <input checked="" type="checkbox"/>	
9.	Nature of Complaint	N/A <input type="checkbox"/> See Form 17/2 <input checked="" type="checkbox"/> See [statement of] [report of] <input type="checkbox"/> [complaint] [letter] <input type="checkbox"/> [Inspector] [Sergeant] <input type="checkbox"/>	
10.	Brief Description of Incident	See [statement of] [report of] <input checked="" type="checkbox"/> [complaint] [letter] <input type="checkbox"/> [Inspector] [Sergeant] <input type="checkbox"/> <i>pro Sec 10</i>	

11. Description of any injuries	N/A <input type="checkbox"/> None <input type="checkbox"/> Not known <input checked="" type="checkbox"/> See [Form 38/17(b)] [Body Chart] <input type="checkbox"/> [Medical Chart] <input type="checkbox"/>	
12. Whether injuries have been confirmed or verified and how	Not known <input checked="" type="checkbox"/> Forensic Medical Officer <input type="checkbox"/>	
13. Any Charge[s] preferred or likely to be preferred against Complainant	[Yes] [No] <input checked="" type="checkbox"/> [Details if known] [Details] [Not known] <input type="checkbox"/>	
14. Details of any Related Complaints or matters which the Investigation will cover	None <input type="checkbox"/>	<i>Incident being investigated under Article 8 Personal.</i>
15. Press or Public interest or other factors which may influence Commission's Decision to supervise investigation and Chief Constable's Assessment	Not known at this stage <input type="checkbox"/>	<i>Press and public interest became Robert Hamill by since chief.</i>
16. Details of Officer[s] Concerned	Not known <input checked="" type="checkbox"/> [Location of officers] Chief Superintendent <input type="checkbox"/> Superintendent <input type="checkbox"/> Chief Inspector <input type="checkbox"/> Inspector <input type="checkbox"/> Sergeant <input type="checkbox"/> Constable <input type="checkbox"/> RUC Reserve <input type="checkbox"/>	<i>Portadown</i>
17. Details of any Related Charge[s] preferred against any Officer[s]	None <input checked="" type="checkbox"/>	
18. Name, Rank, Location of Investigating Officer	See Form 17/2 <input checked="" type="checkbox"/>	

G' Department Authorising Officer

Paul

 [Signature] Superintendent