

RECORD OF WITNESS IN CONNECTION WITH A BREACH OF PLANNING CONTROL



ALLEGED BREACH OF PLANNING CONTROL:

ADDRESS:

Date	Times (from and to)	What is happening and where it is happening	Any vehicle registrations involved and persons present (name or description)

I certify that the entries on the sheet are true and are made at the time of observation of the events stated.

I would be willing to act as a witness in court or at a planning inquiry Yes/ No (please circle)

Signed.....

Name.....

Date.....