

# Intelligence ReportOFFICIAL - SENSITIVE

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| **Your Name &**  **Organisation:** |  | | **Time/Date of Report:** | / | |
| **Phone number:** |  | | **Your reference:** |  | |
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| **Person who provided the information (name/address/ contact number):** | |  | | | |
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| **Name of person who this information relates to:** | |  | | **Date of Birth:** |  |
| **Address/Location:** | |  | | | |
| **Operation name (if known):** | |  | | | |
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| **Information/Intelligence:** | | | | | |
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| **Supporting Information:**  **This is vital information as it ensures we handle your intelligence submission correctly.** |
| Do you believe what you are being told? If not, why? |
| Is the source reliable? If not, why? |
| Is the information widely known or is the person telling you the only one who knows? |
| Is there a risk to anyone if police act on this information, if so why? |
| Is the person aware you will be telling the police? Are they willing to be contacted direct by police? |
| Are there any sensitivities you are concerned about that you want to discuss with police i.e. action may destroy your rapport with the individual or family? |

**Please return fully completed Form to:** [**Partnership.Intelligence@surrey.pnn.police.uk**](file:///C:\Users\denak\AppData\Local\Packages\Microsoft.MicrosoftEdge_8wekyb3d8bbwe\TempState\Downloads\Partnership.Intelligence@surrey.pnn.police.uk)