



HM PRISON
SERVICE

NORWICH

APPLICATION FORM

Use a ballpoint pen and press hard. Sections 2, 3 and 4 will be completed by staff.

| | | | |
|---------------|---------|-----------|-----------------|
| Your Number | A7347EW | Your Name | BURDETTE-DEARIN |
| Your Location | E1-02 | Date | 24-JANUARY-2023 |

1. Application - Say what you want in as few words as possible.

OMU RELEASE DATE NOTIFICATION REQUEST.

HDC ELIGIBILITY DATE.

HOME ADDRESS: 12 KESTREL CLOSE
BECK ROW, BURY ST EDMUNDS, IP28 6EP

RESPONSIBLE ADULT: MICHAEL BARNES

TEL: 07532 311 537

SAME ADDRESS AS ABOVE.

3. Action Taken

(Tick boxes that apply)

- Immediate reply by member of staff (Complete box 3). ☐
- Sent to for reply. ☐
- Record other action taken; by whom and with dates. ☐

Application Log No.

2. Receipt - To be completed by member of staff receiving the application. Prisoner to be given white copy.

Received by (name) (signature)

Epaulette Number

On: (date) at (time)

4. Reply - Final reply to be completed by an appropriate member of staff - within 5 working days.

Yellow copy to be sent to landing officer to give to prisoner.

Good morning,

As your offence was a civil case and not a criminal one, there is no eligibility for HDC.

I have attached a copy of your release dates notification slip, which confirms your release details.

WHINNEY (name) (signature) 11/2/23 (date) at 9:46am (time)

1st Copy (White) Prisoner

2nd Copy (Pink) Department Copy

3rd Copy (Yellow) Prisoner Reply

If you are not satisfied with the reply you may appeal against it using a complaints form (Form COMP 1).
This form is held on the landing with the yellow complaints box.