



FORM A

Subject Member's response to the evidence set out in the investigation report

Case number: 19-20

Please enter the number of any paragraph in the investigation report where you disagree with the findings of fact, and give your reasons and your suggested alternative. If you have no comments, please circle appropriately: Y / **N** - NO COMMENTS

Paragraph number from the investigation report	Reasons for disagreeing with the findings of fact provided in that paragraph	Suggestions as to how the paragraph should read

FORM B

Other information relevant to the complaint

Please set out below, using the numbered paragraphs, any evidence you feel is relevant to the complaint made about you, noting that the hearings are normally held in public and this information and evidence will be made available. Where this evidence is in the form of documents, please give details of the documents you intend to refer to.

Case Number: 19-20 - NO FURTHER INFORMATION

Paragraph Number (for you to insert)	Details of evidence

Signature

Print name WILLIAM HEWITT.....

NO SCANNER AVAILABLE TO UPLOAD A SIGNED DOCUMENT

FORM D

Arrangements for Hearing

Case Number: 19-20

Date	Comments
<p>The hearing has been arranged for Monday 1st March 2021</p> <p>Please confirm your attendance</p>	<p>I WILL NOT BE IN ATTENDANCE AS I WILL BE WORKING AS AN ESSENTIAL WORKER DRIVING FOR ARRIVA.</p>

Representation	Comments
<p>Are you intending to be represented at the hearing? If so, please confirm the name of your representative. If you appoint a representative you will only be able to address the Cttee as a witness.</p>	<p>NOT BEING REPRESENTED</p>

Accessibility requirements	Comments
<p>This hearing will take place via Teams, or with you attending the council chamber in the appropriately socially distanced manner. Please let us know if you have any access requirements or support needs</p>	<p>NOT APPLICABLE</p>

Witnesses	Comments
<p>You will have the opportunity to call witness of fact to support your case. Please list your witnesses on FORM E but let us know of any accessibility requirements here</p>	<p>NOT APPLICABLE</p>

Documentary evidence	Comments

The investigators report and annexes will be considered by the committee. Are there any other documents that you would like the committee to consider? If so please list them here.	NOT APPLICABLE
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Signature

Print name WILLIAM HEWITT

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FORM E

Details of proposed witnesses – **NO WITNESSES ARE BEING CALLED**

Case Number: 19-20

Details of witnesses	1.	
	2.	
	3.	

Witness 1	Details of evidence
<p>Will the witness give evidence about the allegation?</p> <p>If yes, please provide details about the evidence the witness will give</p>	

Witness 2	Details of evidence
<p>Will the witness give evidence about the allegation?</p> <p>If yes, please provide details about the evidence the witness will give</p>	

Witness 3	Details of evidence
<p>Will the witness give evidence about the allegation?</p> <p>If yes, please provide details about the evidence the witness will give</p>	

Signature

Print name WILLIAM HEWITT.....

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