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SCHEDULE 1

Article 2

THE RACE RELATIONS (NORTHERN IRELAND) ORDER 1997 Article 63(1)(a)

Questionnaire of Person Aggrieved

To (name of person to be questioned) of (address)

1.--(1) I

of

(address)

(name of questioner)

consider that you may have been discriminated against me contrary to the Race Relations (Northern Ireland) Order 1997.

(2) (Give date, approximate time and factual description of the treatment received and of the circumstances leading up to the treatment.)

(3) I consider that this treatment may have been unlawful [because

(complete if you wish to give reasons, otherwise delete)].

2. Do you agree that the statement in paragraph 1(2) above is an accurate description of what happened? If not, in what respect do you disagree or what is your version of what happened?

3. Do you accept that your treatment of me was unlawful discrimination by you against me?

If not—

(a) why not,

(b) for what reason did I receive the treatment accorded to me, and

(c) how far did considerations of colour, race, nationality (including citizenship) or ethnic or national origins affect your treatment of me?

4. (Any other questions you wish to ask.)

5. My address for any reply you may wish to give to the questions raised above is [that set out in paragraph 1(1) above] [the following address

].

(signature of questioner)

(date)

N.B.—By virtue of Article 63 of the Race Relations (Northern Ireland) Order 1997 this questionnaire and any reply are (subject to the provisions of the Article) admissible in proceedings under the Order and a court or tribunal may draw any such inference as it considers just and equitable from a failure without reasonable excuse to reply within a reasonable period, or from any evasive or equivocal reply, including an inference that the person questioned has discriminated unlawfully.

SCHEDULE 2

Article 2

THE RACE RELATIONS (NORTHERN IRELAND) ORDER 1997 Article 63(1)(b)

Reply by Respondent

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To (name	e of questioner)
of	(address)
1. I (name of pers	on questioned)
of (address) hereby acknowledge receipt of the questionnaire signed by you and dated	
which was served on me on	(date)

[I agree that the statement in paragraph 1(2) of the questionnaire is an accurate description of what happened.]

[I disagree with the statement in paragraph 1(2) of the questionnaire in that].

I accept/dispute that my treatment of you was unlawful discrimination by me against you.

[My reasons for so disputing are

The reason why you received the treatment accorded to you and the answers to the other questions in paragraph 3 of the questionnaire are

].

4. (Replies to questions in paragraph 4 of the questionnaire.)

5. [I have deleted (in whole or in part) the paragraph(s) numbered above, since I am unable/unwilling to reply to the relevant questions in the correspondingly numbered paragraph(s) of the questionnaire for the following reasons

].

(signature of person questioned) (date)