☐ DOMESTIC VIOLENCE
☐ INFORMATION ONLY
☐ HATE CRIME
☐ COURTESY REPORT OUTSIDE AGENCY NAME

RONAN POLICE DEPARTMENT CRIME/INCIDENT REPORT

PAGE ____ OF ____ PAGES
CASE NO.
KEY CASE

CODE SECTION	CRIME

LOCATION (Be specific)	DATE REPORTED	OCCURRED ON/OR BETWEEN	DATE	DAY	TIME
FIRM NAME (at location)	TIME REPORTED		DATE	DAY	TIME

INVOLVEMENT CODES V-VICTIM W-WITNESS L-INVESTIGATIVE LEAD C-COMPLAINANT P-PARENT

CODE	NAME (Last, First, Middle)	D.O.B.	AGE	RACE	SEX	DLN OR SSN
RESIDENCE ADDRESS		CITY	STATE	ZIP		TELEPHONE (Night Time)
BUSINESS ADDRESS		CITY	STATE	ZIP		TELEPHONE (Day Time)
CODE	NAME (Last, First, Middle)	D.O.B.	AGE	RACE	SEX	DLN OR SSN
RESIDENCE ADDRESS		CITY	STATE	ZIP		TELEPHONE (Night Time)
BUSINESS ADDRESS		CITY	STATE	ZIP		TELEPHONE (Day Time)
CODE	NAME (Last, First, Middle)	D.O.B.	AGE	RACE	SEX	DLN OR SSN
RESIDENCE ADDRESS		CITY	STATE	ZIP		TELEPHONE (Night Time)
BUSINESS ADDRESS		CITY	STATE	ZIP		TELEPHONE (Day Time)

VICTIM'S VEHICLE LICENSE #	STATE	YEAR	MAKE	MODEL	BODY STYLE
					☐ 0 UNK ☐ 1 2-DR ☐ 2 4-DR ☐ 3 CONV ☐ 4 P/U ☐ 5 TRUCK ☐ 6 VAN ☐ 7 S/W ☐ 8 RV ☐ 9 M/C ☐ 10 OTHER

COLOR/COLOR	OTHER CHARACTERISTICS (i.e. TC damage, unique marks etc.)	DISPOSITION OF VEHICLE
		☐ IMPOUNDED ☐ OTHER

RACE CODES: A = ASIAN / PACIFIC ISLANDER B = BLACK H = HISPANIC I = AMERICAN INDIAN / ALASKA NATIVE
U = UNKNOWN W = WHITE O = OTHER

EYE COLOR CODES:	BLK	BLU	BRO	GRY	GRN	HZL	PNK	UNK
HAIR COLOR CODES:	BLK	BLN	BRO	GRY	RED	SDY	WHT	UNK

ACTION REQUESTED

☐ Review for complaint
☐ Restraining Order violation
☐ Warrant requested
☐ Probable cause arrest
☐ File only
☐ Follow-up _____
☐ Incomplete _____
☐ Other _____
☐ Juvenile arrest in custody
☐ Cite and release
☐ Courtesy report for other agency

_____
(Officer)

CASE STATUS

CLOSED

☐ Adult arrest
☐ Juvenile arrest
☐ Referred to other agency
☐ Other _____
☐ Warrant requested
☐ Suspect identified, victim refuses to prosecute

SUSPENDED

☐ No investigative leads
☐ Unable to recontact victim
☐ Victim refuses to cooperate

UNFOUNDED

☐ No crime occurred
☐ False police report
☐ Civil

COPIES TO: ☐ COUNTY ATTORNEY ☐ TRIBAL LAW & ORDER ☐ CITY ATTORNEY ☐ Other _____

REPORTING OFFICER	ID#	DATE	APPROVAL	ID#	DATE	ROUTED BY: