

For office use only:
 1. Report Type:
 Crime.
 Incident
 Supplemental

TEHAMA COUNTY SHERIFF'S OFFICE
 P.O. Box 729
 RED BLUFF, CA 96080
 (530) 529-7900 · (530) 529-7933 FAX

For office use only:
 Case Number:

CITIZEN CRIME/INCIDENT REPORT FORM

For office use only:
 Code Section: _____ Description: _____

PLEASE PRINT OR TYPE: *(Instructions on back)*

Today's Date: _____

1. Name: _____

2. Date of Birth: _____

3. Street Address: _____

Street Address

City, State, Zip

Mailing Address: _____

Mailing Address

City, State, Zip

4. Driver's License Number: _____ State: _____

5. Home telephone number: _____

Work telephone number: _____

6. Location of crime/incident: _____

7. Type of crime/incident: _____

8. Property: _____ Value: _____ Identification number: _____

Property: _____ Value: _____ Identification number: _____

Property: _____ Value: _____ Identification number: _____

9. How did it occur? _____

10. When did it happen? Date: _____ Time: _____

11. When did you first discover the crime/incident? _____

12. Narrative Section *(use additional paper if needed)*: _____

Signature

Date

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Received by: _____	Date: _____	Routed to: _____
Is further action required? <input type="checkbox"/> Yes <input type="checkbox"/> No		Additional Charges:
Copies to: <input type="checkbox"/> Detectives <input type="checkbox"/> Patrol <input type="checkbox"/> District Attorney		_____
<input type="checkbox"/> Probation <input type="checkbox"/> RBPD <input type="checkbox"/> Juvenile Justice Center		_____
<input type="checkbox"/> Other _____		Reviewed By _____
		Date _____

INSTRUCTIONS FOR COMPLETING FORM:

Please Note: Gray areas are for office use only and are not to be completed by reporting party.

1. Name: Reporting person's first, middle and last name.
2. Date of Birth: Reporting person's date of birth (eight digits, ex: 01/01/1950)
3. Address: Reporting person's complete street address and mailing address if applicable.
4. Driver's License Number: Reporting party's driver's license number and state.
5. Home and work telephone numbers: Please include area code if out of the 530 area.
6. Location of crime/incident: Address where crime/incident occurred. List cross streets if applicable.
7. Type of crime/incident: Use plain English when describing type of crime/incident (*ex: petty theft, vandalism, suspicious circumstance, etc.*)
8. Property: List type of property (include item name and model number)
Value: List value of property
Identification number: List serial number
(*Use additional pages if necessary*).
9. How did it occur? If known, please describe.
10. When did it happen? If known, list date and time when the crime/incident occurred.
11. When did you first discover the crime/incident occurred?
12. Narrative section: If known, describe the crime/incident that occurred.
?? Write a brief synopsis describing the crime/incident, how did it occur?
?? List any additional victims, witnesses or possible suspects.
?? You may also use the area to list further property. Use additional pages if needed.

148.5. (a) *Every person who reports to any peace officer, district attorney, or deputy district attorney that a felony or misdemeanor has been committed, knowing the report to be false, is guilty of a misdemeanor.*