

CCR 0 _____

CAD# _____

CASE# _____

Admin Use Only

PASO ROBLES POLICE DEPARTMENT CITIZEN CRIME REPORT

Admin Use Only

Code Section

PLEASE PRINT LEGIBLY

CRIME INFORMATION

Harassing Calls Petty Theft (\$400.00 or less in value) Grand Theft (\$400.01 or more in value)

Lost Property Vehicle Tampering Auto Burglary (theft from locked vehicle) Theft from unlocked vehicle

Suspicious Circumstances Vandalism Found Property Other _____

Estimated Property Damage Loss \$ _____ Estimated Property Theft Loss \$ _____

Type of Vandalism: Glass Break Keyed /Scratched Graffiti Cut/Slashed Tires TP/Egging Other _____

Method of Entry: Open/Unlocked Break Glass Pry/Tools Body Force Unknown Other _____

Point of Entry: Door Window Trunk Sunroof Convertible Other _____

Location of Entry: Front Side Rear Roof Driver Side Passenger Side Other _____

Type of Calls: Hang Up Threats/Intimidation Obscene Repeated Harassment Other _____

Address or location where crime occurred:

Street: _____

City: _____, State: _____

House Apartment Street or Parking Lot

Business Park Other _____

When did this incident occur?

Date: ____/____/____ Time: _____ a.m. p.m.

Or between (Date & Time must be included)

____/____/____ & ____/____/____

Time: _____ a.m. p.m.

Time: _____ a.m. p.m.

VICTIM INFORMATION

Full Legal Name (Last, First, Middle) (If this was a business list that name)				Street Address		Phone (Include area Code) ()	
Date of Birth	Driver Lic. #	Race	Gender (Circle One) M F	City, State & Zip		Business Phone # ()	
Reporting Person (If different from victim)				Address (Street, City, State)		Phone (Include area Code) ()	
Date of Birth	Driver Lic. #	Race	Gender (Circle One) M F	Business Phone # (Include area code) ()			

VICTIM VEHICLE INFORMATION

Year	Make	Model	Color	Lic. Plate or VIN & State	Description of Damage
------	------	-------	-------	---------------------------	-----------------------

ADDITIONAL VICTIMS/WITNESSES & OTHER ASSOCIATED PERSONS

(SPECIFY VICTIM WITNESS OR OTHER)

