Your Last Name	Town of Manlius Police Department	Dept. Report #	
Page Number	**Citizen Incident Report**	X-Ref #	

Please complete the boxes that are **not** shaded below to the best of your ability and mail the form to the Town of Manlius Police Department at 1 Arkie Albanese Ave, Manlius NY 13104. A member of the Town of Manlius Police Department will contact you as soon as practical upon receiving this form.

Incident

Incident Type	Incident Address	City / State / Zip	Premise Name (I.e. Business name)
Person Reporting (if not listed below)	**Address**	**City / State / Zip**	**Phone Number**

Occurred From Date	Occurred From Time	Occurred To Date	Occurred To Time	Date Report Mailed	Date Report Received by TMPD

Involved Persons

Type: **VI**ctim **Co**mplainant **SU**spect **AR**rested **F**ound **P**erson **WI**tness **P**arent / **G**uardian **PH**ysician **O**ther **I**nvolved **SP**ouse

Type	Name (Last, First, Middle, Title)	Street No. & Name, Bldg., Apt.

City / State / Zip	Home Phone	Work Phone	DOB	Age	Sex	Race	Ethnic

Alias / Maiden / Nickname	SSN	Other Phone	Skin	Height	Weight	Hair	Eyes	Glasses

Actions / Weapons / Cautions (please describe)	Scars / Marks / Tattoos / Piercings (please describe)	Other Info and Descriptions

Type	Name (Last, First, Middle, Title)	Street No. & Name, Bldg., Apt.

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Actions / Weapons / Cautions (please describe)	Scars / Marks / Tattoos / Piercings (please describe)	Other Info and Descriptions

Please complete property and or vehicle section if your complaint deals with property or a vehicle (I.e. lost, stolen, damaged, found, observed).

Property

Property Codes: 01=lost 02=found 03=lost / found 04=stolen 05=recovered 06=stolen / recovered 07=evidence 08=safekeeping 09=arson 10=damaged 11=impounded 13=repossessed 14=observed 15=abandoned

Code	Qty	Description of article - Be Specific	Serial No.	Value

Vehicle

Vehicle Codes: 01=lost 02=found 03=lost/found 04=stolen 05=recovered 06=stolen/recovered 07=safekeeping 08=arson 09=damaged 10=used in crime 11=impounded 12=towed 13=repossessed 14=observed 15=abandoned

Code	Year	Make	Model	Style	Color	Plate No	State	Expires	Hold

VIN #	Comments about vehicle / observations / damage / etc.

Please provide as many details about this incident below, to include but not limited to: who, what, where, when, how and why. Continue on page 2 if necessary

Narrative

Your Last Name	Town of Manlius Police Department	Dept. Report #
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Narrative Continued

Officer notes below: Leave this section blank for police use

Officer Notes:

Officer	Shield	Date	Sergeant	Shield	Date