

CHAPTER NINETY
REPORT WRITING AND FORMS

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CHAPTER NINETY
REPORT WRITING AND FORMS

I. PURPOSE

The purpose of this directive is to establish guidelines for proper case reporting and form completion.

II. DISCUSSION

This directive shall apply to all Sheriff's Office personnel. The report writing procedure set forth herein concerns the manner of recording information relative to law enforcement incidents, which come to the attention of the Monroe County Sheriff's Office. This directive explains and governs the use of the official Report Form exhibited, and is designed to guide the reporting deputies in preparing reports, which are brief but thoroughly descriptive and explanatory.

This directive does not amend, modify, or change any Office report or procedure that is not specifically covered herein.

This directive has been devised with a view toward "cutting down" the number of forms the field Deputy must carry, and with the aim of making reports more simple and more easy to prepare by the uses of check boxes where possible.

With the proper use and application of the contents along with common sense, reports can be above reproach.

III. POLICY AND PROCEDURE

A. General Personnel Responsibilities

1. All members of the Office shall be personally responsible for the prompt preparation and submission of reports and investigations as prescribed.
2. All members of the Office shall affix their name to all official reports and forms submitted by them relating to matters subject to their investigation and/or assignment.
3. Supervisors shall be held responsible for the close scrutiny of reports submitted by their subordinates and for the correction of reports submitted to them with deficiencies, errors, incompleteness, etc.
4. Any supervisor receiving a report prescribed herein shall require compliance by his/her subordinates with the provisions of this manual. He/she shall specifically:
 - a. Require the use of the correct report form.
 - b. Require preparation and submission of all necessary reports at the end of the Deputy's shift.
 - c. Require full and complete report of all essential information pertinent to the case.
 - d. Inspect the report to ascertain that the information contained therein is consistent with the charge to be made, that all parties named are adequately identified, their participation specified, and that all property mentioned in the report is properly described and evaluated along with serial numbers if available.

e. Check content of all reports received to ensure:

- 1) correct spelling, grammar, verbiage, sentence structure and logical thought is used
- 2) That lost, stolen, found or recovered property is fully described, including reasonable value
- 3) That all copies of reports pages show legible impressions

f. Be responsible for the prompt and proper forwarding of all required reports.

B. Report Submission Requirements

1. An Offense/Incident Report will be written and submitted when:

- a. Information indicates a crime was committed;
- b. Document an arrest;
- c. Property is seized or impounded
- d. The incident may be continual or the deputy feels it needs to be documented, or
- e. The complainant insist a report be written.

Should the victim and/or complainant express a desire not to file charges and/or not to have a report written, a report will be written and in the narrative it shall be noted that the complainant and/or victim refuses to cooperate or does not wish to pursue the investigation.

2. All subsequent investigations to our original case, will be documented on a supplemental report by using our original case number (i.e. recovered property/vehicle, warrant arrest, missing persons and long term investigations).

3. "No Report" a report is not automatically required in the following circumstances:

- a. The complainant / victim is gone and cannot be located when the Deputy arrives; or
- b. The incident is purely a civil matter.
- c. Prior to the Deputy leaving the scene of a call that fits one of the above criteria, he/she will request from a supervisor permission for a "No Report". A supervisor, after being briefly enlightened as to the case, will then approve or disapprove a "No Report" disposition. If a supervisor cannot be contacted, a report will be written.

d. Assist Other Agency (AOA), including but not limited to:

- 1) traffic accident assists
- 2) escorts
- 3) prisoner transports for another agency
- 4) administrative transport
- 5) sick / injured person(s), if the Deputy does not provide first aid or take any other action
- 6) fire calls, if:

- a) A Fire Department responds, and
- b) The Deputy takes no action.

e. Noise complaints, if:

(revised on 6-5-02)

- 1) the complainant(s) is/are anonymous, or
 - 2) the complainant(s) is/are named and request(s) only that the noise be terminated, and if:
 - a) the noise is terminated, and
 - b) the Deputy writes a field contact card noting the subject(s) responsible for the noise, and
 - c) Communications enters the field contact number in the "Comments" field of the Call for Service record, and
 - d) there is no altercation between the subject(s) responsible for the noise and complainant(s).
- f. Courtesy transport from a disabled vehicle, or other non-criminal transport.
- 1) When a Deputy provides a courtesy transport to a member of the opposite sex or to a juvenile of either sex, the Deputy will advise communications of the starting and ending mileage of the transport.
 - 2) In every case, a field contact card will be written for each individual transported and under "Comments" will be noted "Courtesy transport" and the beginning point and destination, along with any other appropriate remarks.
- g. "Walk-through" of bar or other business if there has been no breach of peace or other criminal activity. a "No Report" disposition: will also be allowed should the Deputy request / require a patron to leave, if:
- 1) there is no criminal activity, and
 - 2) a field contact card is written on each patron requested / required to leave
- h. Other circumstances including neighborhood disputes, barking dog complaints, and suspicious person / vehicle complaints if the suspicious person / vehicle cannot be located by the Deputy.
- i. Found property that has no serial number or other identifying mark, and no apparent value:
- 1) When found property is discovered by, or turned in to a Deputy, he/she is to examine it carefully for any serial number or other identifying mark, such as an owner-applied number.
 - a) If the Deputy finds no such number and is reasonably certain that no such number exists in an area of the object which is not immediately visible, and if the property has no apparent value, the Deputy is authorized to submit the property without an offense report, according to procedures described below.
 - b) If the Deputy is not certain that no serial number or other mark exists that could be used to determine at that time or at some point in the future whether the item was in FCIC/NCIC as "wanted", he/she is to contact the/an on-duty supervisor, who will make the final decision regarding whether to look further.
 - c) If a serial number or other identifying mark is found on property with no apparent value, the Deputy is to check FCIC/NCIC to determine whether the property is stolen or wanted for any other reason. If it is, the Deputy is to follow established policy in writing an offense report.

- 2) Submitting property determined to have no serial number or identifying mark:
 - a) The Deputy will notify Dispatch that he/she will be submitting property without a report, plus the name of any supervisor who may have been involved in that determination.
 - b) Dispatch will not "PROP W/O ID" and any supervisor's name in the Remarks section of the Call-for-service screen, and will enter the disposition code as 03 ("handled without report").
 - c) The Deputy will submit the item(s) and a completed property receipt to the Property Division.
 - d) Items with no identifying numbers or marks but of obvious evidentiary and/or monetary value (i.e., drugs, some jewelry, etc.) are exempt from the provisions in this subsection. Offense reports must be written when such items are found and submitted to the Property Division.
- 3) In the event, a member of another law enforcement agency or of the public, requests documentation of such item(s) being turned in to the Sheriff's Office, he/she is to be given a printout of the specific call for service, in accordance with established policies governing public access to law enforcement records.
- j. There will be occasions when a report **SHOULD** be written in the above listed circumstances. The responding Deputy is responsible for recognizing such occasions and reporting accordingly.

4. Procedures

- a. In the following instances, the preparation of a case report by the field unit may be omitted if any of the following circumstances are evident when the Deputy arrives on the scene of a call:
 - 1) The case is "unfounded" at the scene, as indicated in Item 4 below.
 - 2) The complainant is "gone on arrival" ("GOA") and there are no circumstances on the scene requiring the Deputy to take any action.
 - 3) A report would be a duplication of a previous report covering the same incident.
 - 4) No law enforcement action is indicated because:
 - a) there is nothing to substantiate that the crime, violation or incident has occurred, and
 - b) there are no sick or injured parties, and
 - c) there is no loss or recovery of property, and
 - d) the incident is outside the jurisdiction of the Sheriff's Office
 - e) the call must be totally groundless before it can be classified as "unfounded"
 - 5) Civil matter, referred.
 - 6) "False" Burglary / Robbery Alarm: False alarm, as a general policy, will be a "No Report" situation. The following are provided as examples for clarification. The Deputy responding however, should keep in mind the circumstances involved and if they dictate, then the event be recorded for future use.

- a) A bank alarm which has been cleared by the established "code" procedure and contact with bank personnel has been accomplished will be a "No Report" call.
 - b) An alarm call which the Deputy clears by having contact with persons at the premises or the responsible party responds to the premises will be a "No Report" call.
 - c) An alarm call to which the responsible party is contacted and refuses to respond may be a "No Report" call. (Does not apply to Banking Institutions).
 - d) An alarm call, which is cleared and no responsible party is contacted, or no responsible party can be contacted or located to respond, will be a report call.
 - e) In addition to the above, the Office will also allow a "No Report" status if we cannot locate a responsible party; and if:
 - (1) The responding Deputy visually checks the building exterior and determines that the building is secure.
 - (2) The Deputy advises Communications that the building is secure and Communication notes same under "comments" in CFS.
 - (3) The responding Deputy completes a Monroe County Sheriff's Office courtesy inspection card and either places the card in the mail slot under the door or returns it to the administrative sergeant so notification can be made to the property owner the following day. The card is not to be left in plain view as notification that the alarm is malfunctioning. Cards are available from Community Relations Officers.
- b. The Communications Division will assign a case number to every request for law enforcement service including assists to other county agencies, municipal police departments and ambulance or fire department calls.
- 1) Dispatching of field units will include the case number in the original transmission. Case numbers will be needed whether or not a report is to be written.
 - 2) When a complaint is initiated by a walk-in complainant, the individual will be put in either personal contact or telephone contact with a Deputy for case report completion.
 - 3) Communications Officers will indicate "No Report" on the "case card" by drawing a diagonal line across the face of the card from the lower left-hand corner to the top of the card.

C. Uniform Crime Reporting

In an effort to standardize the reporting of crimes, the International Association of Chiefs of Police developed the Uniform Crime Reporting system for the Federal Bureau of Investigation. For practical purposes the reporting of offenses known is limited to certain crime classifications because they are the crimes which are most likely to be reported to the police and they occur with sufficient frequency to provide an adequate basis for comparison. They are also serious crimes by nature and/or volume.

As of January 1, 1971, in compliance with Florida State Statute 23.089, the Office of the Sheriff, Monroe County as well as all law enforcement agencies in the State, must submit their Uniform Crime Reports to the Florida Department of Law Enforcement.

The following list of crime classifications is placed in this manual in their order of importance to the Uniform Crime Reporting system in an effort to familiarize the Deputy in the field with the report classification procedures. It will assist the Deputy in prioritizing categories of the incident or report. Classification of reports and arrests made will not necessarily be the most serious according to State Statute.

1. Homicide
2. Manslaughter
3. Forcible Rape
4. Forcible Sodomy
5. Forcible Fondling
6. Robbery
7. Aggravated Assault
8. Aggravated Stalking
9. Burglary (not Motor Vehicles)
10. Pocket Picking
11. Purse Snatching
12. Shoplifting
13. Theft from Building
14. Theft from Vending Machine
15. Theft from Motor Vehicle
16. Theft of Bicycle
17. Theft of Motor Vehicle Parts
18. All Other Larceny
19. Auto Theft
19. Gambling
20. Simple Assault
21. Simple Stalking (D.V. only)
22. Intimidation (D.V. only)
23. Arson

D. Hotel Rule

The "Hotel Rule" as established by the Federal Bureau of Investigations, in the Uniform Crime Reporting Manual, and as accepted by Florida Uniform Crime Reporting is a system by which burglaries or B & E's of more than one hotel / motel room occurring apparently within the same time span and apparently perpetrated by the same subject(s), may be counted as one offense.

The following information has been gathered from both FBI and Florida Uniform Crime Reporting Manuals, past Office staff meetings and is included in this Manual in an effort to standardize the use of the "Hotel Rule" within this Office.

1. Necessary requisites governing use of the "Hotel Rule":
 - a. The Incidents In question must be burglary (B & E), and/or theft.
 - b. The incidents in question must have occurred in a series of hotel / motel rooms.
 - c. The incidents in question must have occurred within a reasonable time proximity.

- d. The incidents in question must have been perpetrated by the same subject(s).

NOTE: Use of the "Hotel Rule" is restricted in that all of the above requisites must be present.

2. Examples of proper usage of the "Hotel Rule".

- a. A thief enters or attempts to enter two or more rooms in a hotel or motel on one occasion and steals or attempts to steal property from each room. Each room is rented by a separate guest(s).
- b. Multiple thefts from vehicles are committed by the same subject(s) on the same occasion in a private parking lot or a public garage. A private parking lot is to be defined as any area in which parking is restricted to a particular group of people, such as employees, patrons, or guests.

In the above instances, one case number will be used, a separate lead sheet prepared for each room or vehicle and said case number subdivided on each lead sheet in the following manner, 1000(A), 1000(B), 1000(C). Compliance with the above will allow the reporting of all pertinent information, but will permit the department to count only one incident of burglary (13 & E) or larceny under case number 1000.

E. Types of Reports

See each section for their uses and instructions:

- 1. Arrest / Notice to Appear
- 2. Probable Cause Affidavit
- 3. Narrative Continuation
- 4. Adult Notice to Appear
- 5. Juvenile Civil Citation Form
- 6. Offense / Incident Report
- 7. Property Receipt
- 8. Vehicle Acquisition / Receipt
- 9. Uniform Traffic Citation
- 10. Field Contact

F. Specific Instructions for Completing Required Reports:

1. The Arrest / Notice to Appear Form

This form is used for any arrest that is made for any reason and it can be used for a "Notice to Appear."

When a Deputy makes a "probable cause" arrest and no warrant exists, he will complete an Offense / Incident Report and Arrest / Notice to Appear. He will complete the Arrest / Notice to Appear in its entirety including a detailed narrative. He will then write in the NAME box on the Offense / Incident Report Arrestee / Suspect Section "See Arrest / Affidavit" leaving the remaining boxes for Arrestee blank, except those referring to the descriptive boxes at the bottom of the Offense / Incident Report. The Deputy will also write in the narrative section of the Offense / Incident Report "See Arrest / Affidavit." The narrative on the Arrest / Notice To Appear will then take the place of the narrative on the Offense / Incident Report

In some instances of serious crimes, as in a homicide, both narratives of Offense / Incident Report and Arrest Affidavit will be used depending upon information needed and requirements of a supervisor.

Administrative Section

OBTS Number: This number will be supplied by Corrections personnel and placed on Affidavit by arresting officer or squad supervisor. This is a mandatory number.

Report Type: Enter the appropriate number in this field. "1" is used for a full custody arrest, "2" is used for a Notice To Appear.

Juvenile: For use when the arrested person is a juvenile.

Agency ORI: Pre-printed.

Agency Name: Pre-printed.

Agency Report Number: The Sheriff's Office case number shall be printed in this field. This is a mandatory number.

Charge Type: Choose the appropriate category(ies) for the charges placed on the individual. More than one category can be marked for multiple charges.

Agency Arrest Number: The Sheriff's Office Arrest Number shall be printed in this field. It is obtained from the Booking Office. This is a mandatory number.

Location of Address: Print the address of the location of the (include arrest and if appropriate, include a business name of business) name.

Weapon Seized / Type: If a weapon is seized at the time of arrest, choose the appropriate code and place a "1" for yes and "2" for no in the space provided.

If yes, provide the weapon type from the following list.

- | | |
|----------------------------|-------------------|
| Handgun | Blunt Object |
| Rifle | Poison |
| Shotgun | Explosives |
| Firearm | Fire / Incendiary |
| Knife / Cutting Instrument | Simulated Weapon |

Location of Offense: Enter the address including the city where the offense for which the person is being arrested took place. Include a business name as applicable.

Date of Arrest: Place the date of arrest or notice to appear in this field in month-day-year order.
Time of Arrest: This field will reflect the time the officer arrest or notice to appear (use military time).
Booking Date: Not Used.
Booking Time: Not Used.
Jail Date: Not Used.
Jail Time: Not Used.
Fingerprinted: Not Used.

Jail Number,
County ID Number,
Other Local
Number, Not Used
FDLE Number,
DOC Number,
FBI Number:

Defendant Section

Name: Place the name of the defendant in this field in last, first, middle, order.
Alias: If the individual uses an alias, street name or maiden name, the name will be listed in the standard order, last, first, middle. If an alias or maiden name, designate which.
Race: Place the appropriate code in this field.
Sex: Place either M or F in this field.
Date of Birth or Age: Place the date of birth of the defendant in month-day-year, if available or place the approximate age of defendant in the last two spaces in this field.
Height: This is a three character numeric field and will be given feet and inches. Leading zeros will be used as required.
Weight: This is a three character numeric field and will be given in feet and inches. Leading zeros will be used as required.

NOTE: The following codes have been provided as the most common and are in no way intended to limit the codes that can be used.

Eye Color: Choose the appropriate color from the list below and place in this field.

BRO - Brown	BLK - Black
GRY - Gray	BLU - Blue
HAZ - Hazel	GRN - Green
UNK - Unknown	

Hair Color: Select the appropriate hair color and place in this field. If the individual is partially bald, write the color of the hair that does exist.

BRO - Brown	BLK - Black
GRY - Gray	BLN - Blonde
RED - Red	WHI - White
UNK - Unknown	BAL - Bald

Complexion: Choose the appropriate complexion for the individual being reported on from the list below.

LGT - Light	MED - Medium
DRK - Dark	RUD - Ruddy
UNK - Unknown	

Build: Choose the most appropriate build descriptive and place in this field.

THN - Thin	MED - Medium
HVY - Heavy	MUS - Muscular
UNK - Unknown	

Scars, Marks, Tattoos, Unique Physical Features: Describe and provide the location and the of area of the body covered by the scares, mark, tattoo or deformity.

Indication of Alcohol or Drug Influence: If the defendant at the time of arrest is the under the influence of alcohol or drugs check, the appropriate "yes" boxes. If the defendant is obviously not under the influence of alcohol or drugs, check the "no" boxes. If no determination can be made at the time of arrest, check the "unknown" boxes. If yes is checked, ensure that appropriate documentation is contained within the report to support this response.

Local Address: Give the current local address of the defendant.

Phone: Place the defendant's residence area code and phone number in this field.

Residence Type: Select the appropriate code to match the individual's permanent residency as it relates to your agency's jurisdictional boundaries. Place the appropriate number in the space provided on the bottom line of the person's box.

- 1 City - If the permanent address of the individual reflects the same city in which the crime occurred, this number will be placed in the box provided.
- 2 County - If the permanent address of the individual reflects a city different than the location in which the crime occurred, but is within the same county, this number will be placed in the box provided.
- 3 Florida - If the permanent address of the individual reflects a city that is different than that of the crime and is out of the county but within the State of Florida, this number will be placed in the box provided.

4 Out-of-State - If the permanent address of the individual reflects an out-of-state or foreign country address, this number will be placed in the box provided.

Permanent Address: Place the individual's permanent residency including city, state and zip code in this field. If the same as the local address, write "same".

Phone: Place the area code and phone number of the individual's permanent address if different from the local address.

Address Source: Give document or person's name providing the address. For example: Driver's License, voter registration, state ID card, etc. If source is a person, give name in the standard order, last, first, middle.

Business Address: Place the full address of the employer or school in this field.

Phone: Place the area code and phone number of the individual's permanent address if different from the local address.

Address Source: Give document or person providing the address. For example: Driver's License, voter registration, state ID card, etc. (If source is a person, give name in the standard order, last, first, middle).

Business Address: Place the full address of the employer or school in this field.

Phone: Provide the business telephone number with area code in this field.

Occupation: Identify the means by which the individual makes a living or learned trade skills the individual might have. Any skills or job abilities that might assist in locating the individual in the future or past information concerning the individual.

Driver's License, State / Number: Provide the two character state abbreviation and then list the driver's license number of the individual.

Social Security Number: Ensure that all nine digits of the social security number are provided.

INS Number: Place the immigration naturalization service number if applicable in this field ("Green Card" number)

Place of Birth: Provide the name of the city, state, and country where the individual was born.

Citizenship: Place the two character code for the country(s) to which the individual has citizenship. See Appendices for abbreviations of states and countries.

Co-Defendant Section

Co-Defendant's Name: Last, first, middle, place the name of any co-defendant arrested or at large in conjunction with this case.

Race: Place the appropriate alpha code for the race of the co-defendant from the code provided in the defendant section above.

- Sex: Place M or F in this field for the co-defendant's sex.
- Date of Birth: Place the date of birth of the co-defendant in this field in month-day-year order, if known, or approximate age of the co-defendant.
- Status: Check the appropriate category(s) for the co-defendant reported.
- 1 Arrested
 - 2 At Large
 - 3 Felony
 - 4 Misdemeanor
 - 5 Juvenile

Charge Section

- Charge Description: Paraphrase the charge for which the individual is being arrested.
- Counts: Place the number of counts of the charge being placed on the defendant
- Florida Statute / Ordinance: Check whether the charge is a state statute or an ordinance.
- Statute Violation Number: Place the appropriate statute(s) in the fields providing the chapter and section as well as subsections and unit.
- Violation of Section (ORD): If a municipal ordinance involves the same elements as a corresponding state statute, the ordinance number may be placed in this field. If the municipal jurisdiction has an enabling code, place this number in the field for each appropriate statute. Indicate the jurisdiction of the ordinance or code as either municipal or county.

Code Section

- Activity: Choose the appropriate code and place in this field.
- N N/A - Not applicable
 - P Possess - Actual control, care and management of item.
 - S Sell - To transfer or render a controlled substance in exchange for money, services or items of value.
 - B Buy - To acquire a controlled substance by paying or providing services or items of value.
 - T Traffic - The unauthorized manufacture, distribution, sale or possession with intent to distribute any controlled substance in the quantities established by Florida Statute 893.135.

- R Smuggle - Bringing on shore / or across border of goods, wares or merchandise for which duty has not been paid, or goods the importation / exportation / transportation whereof is prohibited
- D Deliver - Actual, constructive or attempted transfer from one person to another.
- E Use - The use of a controlled substance or the legal use of a prescribed substance by the individual.
- K Dispense / Distribute - The transfer or possession of one or more doses of a medicinal drug by a pharmacist or other licensed practitioner to the consumer or to one who represents individual to whom the drug was prescribed or the delivery or transfer of a controlled substance.
- M Manufacture / Produce / Cultivate - The production, preparation, propagation, compounding, cultivating, growing, conversion or processing of a controlled substance either directly or indirectly.
- Z Other - Any activity involving a controlled or illegally used substance that does not fit in the above categories.

Drug Type: Choose the appropriate code and place in the space provided.

- N N/A - Not Applicable.
- A Amphetamine - Any of various derivatives used as stimulants for the central nervous system including but not limited to phenmetrazine, methylphenidate and others.
- B Barbiturate - Any of various derivatives used as sedatives, hypnotics and antispasmodics including but not limited to chloral hydrate, glutethimide, methaqualone, benzodiazepines, and others.
- C Cocaine - Cocaine or ecgonine, including any of their stereo-isomer, and any salt, compound, derivative or preparation of cocaine or ecgonine made from the coca bush.
- E Heroin - A derivative of morphine in either a white or brown powdered form.
- H Hallucinogen - Any substance that includes hallucinations (excluding marijuana) including but not limited to the following: LSD, mescaline and peyote, amphetamine variants, phencyclidine, analogs and others.
- M Marijuana - Applies to all parts of any plant of the genus "Cannabis" whether growing or not; the seeds thereof; the resin extracted from any part of the plant; and every compound, manufacture, salt, derivative, mixture or preparation of the plant or its seeds or resin.
- O Opium / Derivative - Any opium or salt compound, derivative or preparation of opium including but not limited to raw opium, opium extracts, opium fluid extracts, powdered opium, granulated opium, tincture of opium, codeine, ethylmorphine, etorphine, hydrochloride, hydrocodone, hydromorphone, metopon, morphine, oxycodone, oxymorphone, and thebaine.

- P Paraphernalia / Equipment - Any devices used in the production, preparation, propagation, compounding, cultivating, growing, conversion, processing or using a controlled substance.
- S Synthetic - Any drug made completely in the laboratory through the deviation or variation of natural chemical compounds.
- U Unknown - When the type of drug or substance is unknown, this category will be used.
- Z Other - Any other drug or controlled substance that does not fit in the above categories will be placed in this category. If this category is used, ensure that appropriate documentation is contained within the report to support the use of this category.

Amount / Unit: Provide the quantity and the measuring unit in this field. For example: 20 grams, 1 kilo, 2 tons, etc.

State Attorney Number: Not Used.

Court Number: Not Used.

PC / CAPIAS / AC / BW / FW / PW / JUV.PR / CITATION

Check the appropriate category using the definitions below.

- PC Probable Cause - An apparent state of facts found to exist upon reasonable inquiry which would induce an individual to believe, in a criminal case, that the accused person had committed the crime charged. If this category is checked, the probable cause will need to be contained in this report.
- Capias The general name for several different "writs," the common characteristic of which is that they require the officer to take the body of a defendant into custody.
- AC Alias Capias - A second writ issued after the defendant has failed to appear in response to a previous capias.
- BW Bench Warrant - Process issued by the Court itself, or "from the bench", for the attachment or arrest of a person; either in case of contempt, or where an incident has been found, or to bring in a witness who does not obey the subpoena.
- FW Fugitive Warrant - A written order issued as a result of an individual fleeing, evading or escaping to prevent arrest, prosecution or imprisonment.
- PW Parole and Probation Warrant - A written order issued as a result of an individual failing to meet the requirements of parole or probation orders of the Court.
- JUV.PU Juvenile Pickup - An order issued by the Circuit Court for the taking of the named juvenile into custody.

Citation A writ issued out of a Court advising a set date and act that must be performed for compliance, or an order issued by a law enforcement agency to appear before a magistrate or judge at a later date.

Place the number of the above checked document in the space provided below the field.

Date Issued: The date on which the document, either criminal or civil, was issued.

WRIT ATT / DOM VIO INJ / ORDER FOR ARREST

Check the appropriate category where applicable.

WRIT ATT Writ of Attachment - A writ employed to enforce obedience to an order or judgment of the Court. It may take the form of commanding the Sheriff to attach the disobedient party and to have him before the Court to answer his contempt.

DOM VIO INJ Domestic Violence Injunction - A sworn petition before the Court resulting in an injunction for protection in cases of domestic violence. Can include all or any of the following injunctions.

- 1 An injunction restraining any party from committing acts of domestic violence.
- 2 An injunction excluding the respondent from the dwelling which the parties share or from the residence of the petitioner.
- 3 An injunction on the same basis as is provided in Chapter 61, Florida Statute, awarding temporary visitation with regard to children of the parties.
- 4 An injunction provided as in Chapter 61, Florida Statute, establishing temporary support for minor children or a spouse.
- 5 An injunction directing the respondent to participate in assessment and treatment.
- 6 An injunction providing any terms the Court deems necessary for the protection of the victim or domestic violence, including injunctions or directives to the law enforcement agencies.

Order of Arrest: Direction of a Court or Judge, made or entered in writing in order to take custody of an individual for the purpose of holding or detaining him/her to answer a criminal charge or civil demand.

Probable Cause Statement: In determining probable cause to detain the defendant, the Magistrate applies the same standard for issuance of an arrest warrant, and his finding may be based upon sworn complaint, affidavit, deposition under oath, or, if necessary, upon testimony under oath properly recorded.

The elements of the probable cause statement should include the specific facts constituting the cause for arrest:

A substantiated description of the nature and circumstances of the offense; and

The name of the person to be arrested, of if his name is unknown, designate such person by any name or description by which he can be identified with reasonable certainty.

The date and time of the offense should be inserted in the space provided.

Notice to Appear Section: Check the appropriate statement(s) at the beginning of this section and then provide the location including the Court, room number, address, date and time that the defendant is to appear in Court. Then have the individual sign the Notice To Appear section. If a juvenile is the defendant, have a parent or legal guardian sign also.

**Specific Instructions for Utilizing the
"Notice to Appear" Section:**

a. Rules of Criminal Procedure, Rule 3.125, Notice to appear governs how and when an Office member may utilize the Notice to Appear in lieu of a physical arrest.

1) Notice to Appear means, unless indicated otherwise, a written order issued by a law enforcement officer in lieu of physical arrest requiring a person accused of violating the law to appear in a designated court or governmental office at a specified date and time. [CALEA 1.1.3]

2) By Arresting Officer. If a person is arrested for an offense declared to be a misdemeanor of the first or second degree or a violation, or is arrested for violation of a municipal or county ordinance triable in the county, and demand to be taken before a magistrate is not made, Notice To Appear may be issued by the arresting officer unless:

a) The accused fails or refuses to sufficiently identify himself or supply the required information;

b) The accused refuses to sign the Notice To Appear;

c) The officer has reason to believe that the continued liberty of the accused constitutes an unreasonable risk of bodily injury to himself or others;

d) The accused has no ties with the jurisdiction reasonably sufficient to assure his appearance or there is substantial risk that he will refuse to respond to the notice;

e) The officer has any suspicion that the accused may be wanted in any jurisdiction; or

f) It appears that the accused has previously failed to respond to a notice or a summons or has violated the conditions of any pretrial release program.

g) How and When Served - If Notice To Appear is issued, it shall be prepared in quadruplicate. The officer shall deliver one copy of the Notice To Appear to the arrested person and such person in order to secure release, shall give his written promise to appear in Court by signing the three remaining copies: one to be retained by the officer and two to be filed with the Clerk of Court. These two copies shall be sworn to by the arresting officer before another Deputy, Notary Public or a Deputy Clerk. If Notice To Appear is issued pursuant to subsection (b), the Notice shall be issued immediately upon arrest

b. In preparing the Notice To Appear, the Arrest / Notice To Appear Section must be completely filled out. A signed copy is given to the defendant and the defendant must sign the remaining copies.

Administrative Section

Miranda Warning: Check this box if the Miranda Warning was given to the defendant at the time of the arrest.

Hold for
Other Agency: Provide the complete agency name in this field and the initials of the verifying party.

Adults Only: (Hold if for First Appearance) - Check if an adult is to be held for first appearance, without bond, and then provide the reason in the space provided.

Signature: Complete the jurat section providing the officer's or complainant's signature and then print the name in the space provided along with ID number and the district to which the officer is assigned as applicable.

Oath: Complete the section provided.

Bond Information

Date: Not used.

Bond -
Charge Number: Not used.

Type-
Bond Type: Not used.

Returnable
Court Date: Not used.

Returnable
Court Time: Not used.

Release Date: Not used.

Release Time: Not used.

Releasing Officer: Not used.

Page-of-Page: (Found on all reports) - Indicate the placement of this page in relation to the total report, (i.e., 1 of 3 pages, 4 of 20 pages).

NOTE: See example of "Arrest / Notice to Appear Form" at end of this Chapter.

2. Probable Cause Affidavit

This form is used as the continuation for additional charges on Arrests / Notices to Appear and for all juvenile arrests, and as an affidavit for requesting warrant and/or capias.

On Misdemeanor Charge - Complainant can sign affidavit.

On felony charge - Officer signs affidavit insuring all elements of the crime are covered.

Administrative Section

OBTS Number: This field will be completed by Corrections personnel.

Report Type: Enter the appropriate number in this field.

Juvenile: For use when the arrested person is a juvenile.

Agency ORI: Pre-printed.

Agency Name: Pre-printed.

Agency Report Number: The Sheriff's Office case number shall be printed in this field.

Location of Offense: Enter the address including the city where the offense for which the person is being arrested took place. Include a business name as applicable.

Date of Offense: Place the date of the offense in this field in month-day-year order.

Date of Arrest: Place the date of arrest, if applicable, in this field in month-day-year order.

Defendant Section

Name: Place the name of the defendant in this field in last, first, middle, order.

Alias: If the individual uses an alias, street name or standard order, last, first, middle. If a maiden name, the name will be listed in the alias or maiden name, designate which.

Race: Place the appropriate code in this field.

Sex: Place either M or F in this field.

Date of Birth or Age: Place the date of birth of the defendant in month-day-year, if available or place the approximate age of defendant in the last two (2) spaces in this field.

Height: This is a three (3) character numeric field and will be given feet and inches. Leading zeros will be used as required. EXAMPLE: 5 foot 3, would be 503.

Weight: Write in weight in pounds, as 180.

NOTE: The following codes have been provided as the most common and are in no way intended to limit the codes that can be used.

Eye Color: Choose the appropriate color from the list below and place in this field.

BRO - Brown	BLK - Black
GRY - Gray	BLU - Blue
HAZ - Hazel	GRN - Green
UNK - Unknown	

Hair Color: Select the appropriate hair color and place in this field. If the individual is partially bald, write the color of the hair that does exist.

BRO - Brown
GRY - Gray
RED - Red
UNK - Unknown

BLK - Black
BLN - Blonde
WHI - White
BAL - Bald

Complexion: Choose the appropriate complexion from the list below.

LGT - Light
DRK - Dark
UNK - Unknown

MED - Medium
RUD - Ruddy

Build: Choose the most appropriate build descriptive and place in this field.

THN - Thin
HVY - Heavy
UNK - Unknown

MED - Medium
MUS - Muscular

Local Address: (Street, Apt #) Give the current local address of the defendant

Phone: Place the defendant's residence area code and phone number in this field.

Juvenile Section

Parent / Legal Custodian / Other: Check the appropriate category for the adult responsible for the juvenile being reported. If other, please specify, such as social worker, sister, minister, etc.

Name - Last, First, Middle: Put the name of the adult legally responsible for the juvenile.

Residence Phone: Complete telephone number including area code.

Address: Place the address of the individual providing number, street, city, state and zip code.

Business Phone: Provide the complete telephone number of the adult including the area code of either the employer or the school.

Notified by: Name - Provide the name of the individual notifying the legally responsible adult in the standard order: last, first, middle.

Date of Notification: Give the date the individual was notified in this field in the following manner: month, day, year.

Time of Notification: Give the time of notification. This is a four (4) character numeric field using military time. (Twenty-four hour time)

Juvenile Disposition: Choose the appropriate category to identify the juvenile's handling and place the code in the box provided.

Release to: Name - Provide the name of the individual to whom the juvenile was released in the standard manner: last, first, middle.

- Relationship: Place the relationship of the individual to the juvenile in this field.
- Date of Release: Provide the date the juvenile was released by your agency in the following manner: month, day, year.
- Time of Release: Give the time of the release. This is a four (4) character numeric field using military time. (Twenty-four hour time)

Charge Section

- Charge Description: Paraphrase the charge for which the individual is being arrested.
- Counts: Place the number of counts of the charge being placed on the defendant Florida Statute / Ordinance: Check whether the charge is a state statute or an ordinance.
- Statute Violation Number: Place the appropriate statute(s) in the fields providing the chapter and section as well as subsections and units.
- Violation of Section (ORD): If a municipal ordinance involves the same elements as a corresponding state statute, the ordinance number may be placed in this field. If the municipal jurisdiction has an enabling code, place this number in the field for each appropriate statute. Indicate the jurisdiction of the ordinance or code as either municipal or county.

Code Section

- Activity: Choose the appropriate code and place in this field.
- N N/A - Not applicable
 - P Possess - Actual control, care and management of item.
 - S Sell - To transfer or render a controlled substance in exchange for money, services or items of value.
 - B Buy - To acquire a controlled substance by paying or providing services or items of value.
 - T Traffic - The unauthorized manufacture, distribution, sale or possession with intent to distribute any controlled substance in the quantities established by Florida Statute 893.135.
 - R Smuggle - Bringing on shore / or across border of goods, wares or merchandise for which duty has not been paid, or goods the importation / exportation / transportation whereof is prohibited.
 - D Deliver - Actual, constructive or attempted transfer from one person to another.
 - E Use - The use of a controlled substance or the illegal use, of a prescribed substance by the individual.
 - K Dispense / Distribute - The transfer or possession of one or more doses of a medicinal drug by a pharmacist or other licensed practitioner to the consumer or to one who represents the individual to whom the drug was prescribed or the delivery or transfer of a controlled substance.

M Manufacture / Produce / Cultivate - The production, preparation, propagation, compounding, cultivating, growing, conversion or processing of a controlled substance either directly or indirectly.

Z Other - Any activity involving a controlled or illegally used substance that does not fit in the above categories.

Drug Type: Choose the appropriate code and place in the space provided.

N N/A - Not Applicable.

A Amphetamine - Any of various derivatives used as stimulants for the central nervous system including but not limited to phenmetrazine, methylphenidate and others.

B Barbiturate - Any of various derivatives used as sedatives, hypnotics and antispasmodics including but not limited to chloral hydrate, glutethimide, methaqualone, benzodiazepines, and others.

C Cocaine - Cocaine or ecgonine, including any of their stereoisomer, and any salt, compound, derivative or preparation of cocaine or ecgonine made from the coca bush.

E Heroin - A derivative of morphine in either a white or brown powdered form.

H Hallucinogen - Any substance that includes hallucinations (excluding marijuana) including but not limited to the following: LSD, mescaline and peyote, amphetamine variants, phencyclidine, and others.

M Marijuana - Applies to all parts of any plant of the genus "Cannabis" whether growing or not; the seeds thereof; the resin extracted from any part of the plant; and every compound, manufacture, salt, derivative, mixture or preparation of the plant or its seeds or resin.

O Opium / Derivative - Any opium or salt compound, derivative or preparation of opium including but not limited to raw opium, opium extracts, opium fluid extracts, powdered opium, granulated opium, tincture of opium, codeine, ethylmorphine, etorphine, etorphine, hydrochloride, hydrocordine, hydromorphine, metopon, morphine, oxycodone, oxymophone, and thebaine.

P Paraphernalia / Equipment - Any devices used in the production, preparation, propagation, compounding, cultivating, growing, processing or using a controlled substance.

S Synthetic - Any drug made completely in the laboratory through the deviation or variation of natural chemical compounds.

U Unknown - When the type of drug or substance is unknown, this category will be used.

Z Other - Any other drug or controlled substance that does not fit in the above categories will be placed in this category. If this category is used, ensure that appropriate documentation is contained within the report to support the use of this category.

Amount / Unit: Provide the quantity and the measuring unit in this field. For example: 20 grams, 1 kilo, 2 tons, etc.

State Attorney
Number: Not used.

Court Number: Not Used.

PC / CAPIAS / AC / BW / FW / PW / JUV.PU / CITATION

Check the appropriate category using the definitions below.

- PC Probable Cause - An apparent state of facts found to exist upon reasonable inquiry which would induce an individual to believe, in a criminal case, that the accused person had committed the crime charged. If this category is checked, the probable cause will need to be contained in this report.
- Capias The general name for several different "writs," the common characteristic of which is that they require the officer to take the body of a defendant into custody.
- AC Alias Capias - A second writ issued after the defendant has failed to appear in response to a previous capias.
- BW Bench Warrant - Process issued by the Court itself, or from the bench", for the attachment or arrest of a person; either in case of contempt, or where an incident has been found, or to bring in a witness who does not obey the subpoena.
- FW Fugitive Warrant - A written order issued as a result of an individual fleeing, evading or escaping to prevent arrest, prosecution or imprisonment.
- PW Parole and Probation Warrant - A written order issued as a result of an individual failing to meet the requirements of parole or probation orders of the Court.
- JUV.PU Juvenile Pickup - An order issued by the Circuit Court for the taking of the named juvenile into custody.
- Citation A writ issued out of a Court advising a set date and act that must be performed for compliance, or an order issued by a law enforcement agency to appear before a magistrate or judge at a later date.

Place the number of the above checked document in the space provided below the field.

Date Issued: The date on which the document, either criminal or civil, was issued.

WRIT ATT / DOM VIO INJ / ORDER FOR ARREST

Check the appropriate category where applicable.

- WRIT ATT Writ of Attachment - A writ employed to enforce obedience to an order o judgment of the Court. It may take the form of commanding the Sheriff to attach the disobedient party and to have him before the Court to answer his contempt.

DOM VIO INJ Domestic Violence Injunction - A sworn petition before the Court resulting in an injunction for protection in cases of domestic violence. Can include all or any of the following injunctions.

- 1 An injunction restraining any party from committing acts of domestic violence.
- 2 An injunction excluding the respondent from the dwelling which the parties share or from the residence of the petitioner.
- 3 An injunction on the same basis as is provided in Chapter 61, Florida Statute awarding temporary visitation with regard to minor children of the parties.
- 4 An injunction provided as in Chapter 61, Florida Statute, establishing temporary support for minor children or a spouse.
- 5 An injunction directing the respondent to participate in assessment and treatment.
- 6 An injunction providing any terms the Court deems necessary for the protection of the victim of domestic violence, including injunction or directives to the law enforcement agencies.

Order of Arrest: Direction of a Court or Judge, made or entered in writing in order to take custody of an individual for the purpose of holding or detaining him/her to answer a criminal charge or civil demand.

Probable Cause Statement: In determining probable cause to detain the defendant, the Magistrate applies the same standard for issuance of an arrest warrant, and his finding may be based upon sworn complaint, affidavit, deposition under oath, or, if necessary, upon testimony under oath properly recorded.

The elements of the probable cause statement should include the specific fact constituting the cause for arrest: A substantiated description of the nature and circumstances of the offense, including all elements of the crime.

The name of the person to be arrested, or if his name is unknown, designate such person by any name or description by which he can be identified with reasonable certainty.

The date and time of the offense should be inserted in the space provided.

At the end of the probable cause statement, space will be provided for the Judge's comments as to whether or not probable cause was established.

Administrative Section

Miranda Warning: Check this box if the Miranda Warning was given to the defendant at the time of the arrest.

Hold for Other Agency: Provide the complete agency name in this field and the initials of the verifying party.

Adults Only: (Hold if for First Appearance) - Check if an adult is to be held for first appearance, without bond, and then provide the reason in the space provided.

Signature: Complete the signature section providing the officer's or complainant's signature and then print the name in the space provided along with ID number and the district to which the officer is assigned as applicable

Oath: Complete the section provided.

Bond Information

Date: Place the date the bond is made in the space provided.

Bond - Charge Number: Place the dollar value of the bond for each charge in the space provided.

Type - Bond Type: Choose from the types of bonds provided at the left of this section and place the bond type for each charge in the appropriate spaces.

Returnable Court Date: Place the Court date on which the defendant is to appear in Court.

Returnable Court Time: Using twelve hour time, place the time the defendant is to appear in Court and check whether AM or PM.

Release Date: Provide the date the defendant was released as a result of bond.

Release Time: Using twelve (12) hour time, place the time the defendant was released on bond in this field.

Releasing Officer: Signature and ID / Badge number of the officer making the release of the defendant.

Page-of-Page: (Found on all reports) - Indicate the placement of this page in relation to the total report, (i.e., 1 of 3 pages, 4 of 20 pages).

3. Narrative Continuation Form

OBTS Number: This field will be completed by Corrections personnel.

Report Type: Enter the type of Report continued.

NOTE: This may be used to continue the Probable Cause Affidavit Form also.

Juvenile: For use when the arrested person is a juvenile.

Agency ORI: Pre-printed.

Agency Name: Pre-printed.

Agency Report Number: The Sheriff's Office case number shall be printed in this field.

Administrative Section

Miranda: Check this box if the Miranda Warning was given to the defendant at he time of the arrest.

Hold for
Other Agency: Provide the complete agency name in this field and the initials of the verifying party.

Adults Only: (Hold if for First Appearance) - Check if an adult is to be held for first appearance, without bond, and then provide the reason in the space provided.

Signature: Complete the signature section providing the officer's or complainant's signature and then print the name in the space provided along with ID number and the district to which the officer is assigned as applicable.

Oath: Complete the section provided.

Bond Information

Date: Not used.

Bond -
Charge Number: Not used.

Type- Bond Type: Not used.

Returnable
Court Date: Not used.

Returnable
Court Time: Not used.

Release Date: Not used.

Release Time: Not used.

Releasing Officer: Not used.

Page-of-Page: (Found on all reports) - Indicate the placement of this page in relation to the total report, (i.e., 1 of 3 pages, 4 of 20 pages).

4. Adult Notice to Appear

The adult Notice to Appear form mad be use in all instances as described above in section XYZ and should be used in place of the larger format.

Case Number: Enter the appropriate Monroe County Sheriff's Office case number.

Date and
Time Section: Enter the day, date (i.e., 6) month, year and time of the violation, circle the appropriate time designator, a.m. or p.m.

Last: Enter the person to be cited last name.

First Name: Enter the persons first name:

M I: Enter the persons middle initial.

Address: Enter the persons mailing and/or physical address.

Race / Sex: Enter the appropriate race and sex where indicated.

Height: Enter the persons height in feet and inches. (i.e. 5 03).

Weight: Enter the persons weight to the nearest pound.

Hair: Enter the predominate hair color.

BRO - Brown	BLK - Black
GRY - Grey	BLN - Blonde
RED - Red	WHI - White

Eyes: Enter the persons eye color.

BRO - Brown	BLK - Black
GRY - Grey	BLU - Blue
HAZ - Hazel	GRN - Green

Social Security Number: Enter the person Social Security number.

Driver's License Number: Enter the person's driver license number and the state of issue's letter designation. (i.e., FL, AL, OK, DL, etc.)

Scars, Marks, Tattoos: Describe any tattoos and their location.

Employer: List the company name or individual and a possible location. The island the business is located is adequate.

at "(location)": List where the offense occurred.

Zone / Grid: Enter the Division (zone) and appropriate area grid.

"..following offense": Describe the violation which occurred.

"in violation of": Enter the state statute or county ordinance of the violation.

City / County Ord. Florida Statute: Check the appropriate Block.

Details: Provide a summary of and elements of the violation.

Court Info.: Enter the Court and courtroom, date, year and time the person is to appear to answer the charge.

Signature of Defendant: The person cited signs here.

Officer's

Name and ID: Print your name and permanent Office ID number.

Signature
of Officer: Issuing officer signs here.

5. Juvenile Civil Citation

The Juvenile Civil Citation shall be used for all juvenile notice to appear situations.

Agency Name: Enter the Monroe County Sheriff's Office.

Case No.: Enter the Sheriff's Office case number.

Date and Time Section: Enter the day, date (i.e., 6), month, year and time of the violation, circle the appropriate time designator, a.m. or p.m.

Last: Enter the juvenile's last name.

First Name: Enter the juvenile's first name.

M I: Enter the juvenile's middle initial.

Address: Enter the mailing and/or physical address of the juvenile.

Race / Sex: Enter the appropriate race and sex of the juvenile.

Height: Enter the height of the juvenile in feet and inches, (i.e., 5 07).

Weight: Enter the weight of the juvenile to the nearest pound.

Hair: Enter the predominate hair color;

BRO - Brown	BLK - Black
GRY - Grey	BLN - Blond
RED - Red	WHT - White

Eyes: Enter the appropriate eye color;

BRO - Brown	BLK - Black
GRY - Grey	BLU - Blue
HAZ - Hazel	GRN - Green

DOB: Enter the juvenile's date of birth, (i.e., 01/01/80).

Social Security Number: Enter the juvenile's Social Security number if known. List UNK if it is not known.

Driver's License Number: Enter the juvenile's driver's license and the issuing state's two (2) letter designation, (i.e., FL, NY).

Parent / Legal Guardian Name: Enter the juvenile's parent or guardian's and note if parent or guardian.

Phone Number: List the parent / legal guardian's phone number. If both a work and home number can be provided designate which is home or work.

Location: Enter the location the violation occurred.

Zone / Grid: Enter the division (zone) and grid of occurrence.

Violation Info.: Brief description of violation and the City / County Ordinance or state statute in violation of.

City / County Ord. / Florida Statute: Check the appropriate box.

Details: Provide full details of and elements of the violation.

Signature of Defendant: Have the juvenile sign acknowledge receipt of the citation here.

Officer's Name and ID: Print the your name and provide your permanent Office I number.

Signature of Officer: The issuing Officer signs.

-- REVERSE SIDE OF CITATION --

Victim Info.: Fill in the requested information as indicated.

Additional Info.: Provide any additional information that may be of benefit to the officer or court officials.

Ass / Batt Info.: Enter the appropriate information for assault or battery case.

Drug Info.: Enter the appropriate activity, type (of drug), quantity, unit, an value.

Theft Info.: Enter the appropriate information as requested, referring to the Offense / Incident Report for proper coding.

6. Offense / Incident Report Writing Manual

a. Specialized Report Formats

Office personnel are often required to complete reports for which certain specific information must be obtained. The most common of these reports are Sheriff's Vehicle Accidents, Boating Accidents and Aircraft Accidents. The following formats have been designed to assist personnel in completing Narrative Reports pertaining to the above.

1) Accidents Involving Sheriff's Marked or Unmarked Vehicles

Sheriff's
Unit Number:

Vehicle: Year, make, model, style, color, VIN number; license number, year, state, type

Damage: Type, location, dollar amount.

Driver: Name, race, sex, age, date of birth
Address:
Phone:

Driver's License Number:
Type:
Expires:
Injury: (Type, severity, condition)

Passenger: Name, race, sex, age, date of birth
Address:
Phone:

Status: (Observer, prisoner, Deputy, transportation)
Location in Vehicle:
Injury: (Type, severity, condition)

Vehicle #2: Year, make, model, style, color, VIN number; license number, year, state, type.

Incident: Include witness statements, attachments.

Supervisor Notified
/ On Scene: Rank, name.

Medical Rescue: Unit number, Names-Technicians.

Wrecker: Name, Location vehicle's towed.

FHP: Name, Unit number / ID Investigating Trooper.

Photographs: Taken by (whom) for Sheriff's Office.

NOTE: The report of a Sheriff's Vehicle Accident shall be prepared by a supervisor. This report is in addition to the Florida Highway Patrol Accident Report.

2) Boating Accidents

Type: Capsizing, sinking, fire, explosion, collision.

Location: Body of water name, location on water, nearest city or town.

Weather / Water

Conditions: Visibility: (Surface / below surface)
Weather: (Clear, rain, fog, storm)
Water: (Smooth, calm, choppy, rough, storm)
Wind: (Direction, velocity)
Temperature: (Air / water)
Forecasts Available Used: (Source / time)

Vessel #1: Description: Year, Make, Model, Type (Open, Cabin, House, Other) Length, bow registration number, hull number, hull type (wood, aluminum, steel, fiberglass, wood /

fiberglass), propulsion (outboard, inboard, inboard / outboard), color. Damage: Amount, Type.

Operator: Name, race, sex, age, date of birth, address, phone number, vessel operating experience, boating safety training-type, date. Injury:

Occupants / Towed: Name, race, sex, age, date of birth, address, phone number, activity, injury.

Equipment: Personal flotation devices: (no.)
Used: (no.)
Fire extinguisher: (type), (amount used).

Emergency Signal Device: (type, used - yes, no) Equipment failure caused accident (description of how).

Vessel #2: (Same format as above)

Injured / Deceased: Name, race, sex, age, date of birth, address, phone number, nature / extent of injuries, condition. First Aid: Type, by whom. Suspected cause of death.

Transported by: _____

To: (Facility)

Next of kin: Name, address, phone

Notified by: _____

Incident: Include cause of accident and if Coast Guard aid to navigation was present and/or contributed to accident.

3) Aircraft Accidents

Location: (Airport name, key name, mile marker, Gulf / Ocean) (If water, body of water name, distance from shore)

Weather Conditions: (Obtain from nearest weather service to area of incident)
Sky Coverage: (Clouds - clear, scattered, broken, overcast)
Visibility: (Statute miles)
Weather: (Rain, thunderstorm, hail, snow, ice, hurricane)
Vision Obstructions: (Blowing dust, sand, spray, fog, smoke & haze)
Severity: (light, moderate, heavy)
Temperature: (Degrees Fahrenheit)
Wind: (Direction / velocity)

Aircraft From:
Destination: Due to Arrive: (Time)
Flight Plan Filed: (Location)
Activity: (Air taxi, instruction, pleasure, aerial acrobatics, business, sightseeing)

Aircraft Description: Year, make model, type (balloon, blimp, glider, rotor-craft, airplane) Classification, (Gyroplane, helicopter, single-engine land, multi-engine land, single engine sea, multi-engine sea, ultra-light) Color, and registration number: Damage: Type (Wings, fuselage, underside, landing gear, tail, fire) Severity (none, minor, substantial, totaled)

Pilot: Name, race, sex, age, date of birth, address, phone number, certification number,
 Expires: _____
 Medical certification - classification: _____ Date _____
 Injury: (Type) Extent: _____ Condition: _____
 First Aid: (Type) (By whom)
 (List additional occupants using above format)

Incident: Circumstances surrounding occurrence. Include suspicious activity (low approach, extra fuel tanks, stripped interior, flying without lights or other suspicious or criminal activity indications) Indicate any evidence that may indicate pilot intoxicated.

Notifications: Supervisor: Name, rank, time, on scene
 Medical Rescue, if any (Unit #, area)
 PIO: (By whom, on scene)
 CID: Name, rank, time, on scene
 FAA / NTSB: Name, date, time, etc, by whom

Photographs: Yes, no, - By whom for Sheriff's Office.

b. Common Data Elements

The following informational elements are common to all of the reports and will be addressed fully in this section rather than the individual instructions for each of the sections.

NOTE: All areas on the Offense / Incident from that are shaded in blue must be filled in UCR purposes, unless the information is not available.

Date: The date will be a six digit numeric field in month, day, year order in the following manner.

Month: Numbers 01 through 12;

Day: Numbers 01 through 31;

Year: Last two digits of the appropriate year.

Time: The time will be a four character numeric field using military time(24-hour time).

A.M.	MILITARY	P.M.	MILITARY
Midnight	2400		
Midnight-1:00	0001-0059	Noon	1200-1259
1:00	0100-0159	1:00	1300-1359
2:00	0200-0259	2:00	1400-1459
3:00	0300-0359	3:00	1500-1559
4:00	0400-0459	4:00	1600-1659
5:00	0500-0559	5:00	1700-1759
6:00	0600-0659	6:00	1800-1859
7:00	0700-0759	7:00	1900-1959
8:00	0800-0859	8:00	2000-2059
9:00	0900-0959	9:00	2100-2159
10:00	1000-1059	10:00	2200-2259
11:00	1100-1159	11:00	2300-2359

Name: If a person, enter the last name, first name, middle name or initial. If applicable, provide the suffix abbreviations used to distinguish between fathers and sons (Jr., Sr., III, etc.) If a business or corporation, enter the full legal name of the business or corporation.

Address: Number and street, apartment number, city and state and zip code. Enter the address of the individual, or business. The address will be provided in the following manner. If possible, avoid the use of post office box numbers. Include the number and street and when applicable, an apartment or suite number. Include the city and state and zip code. If rural area, provide directions from major roads or mile post or any descriptions that would clearly define the location.

Telephone Numbers: Complete telephone numbers, including area code and extensions where applicable.

Administrative Headings

Offense - Arrest: (Found only on the Narrative Continuation report) - In the box provided, place the appropriate number if the narrative continuation is (1) part of an offense report or (2) if it is used as part of an Arrest / Notice to Appear report.

Juvenile: (Found on the Offense Incident and the Narrative Continuation reports) - Check this block as a flag to alert others if any information contained in this report should not be released as public record due to juvenile involvement.

Original or Supplement: (Found on all reports) - In the box provided, place the appropriate number if the report is (1) part of the original report or (2) if a supplement to the original already on file. The following format will be required on all Supplementary reports:

Day-Date-Time of Occurrence:

Offense:
Victim:
Subject:
Property:

Page-of-Page: (Found on all reports) - Indicate the placement of this page in relation to the total report, (i.e., 1 of 3 pages, 4 of 20 pages). If a supplemental report, the renumbering series should be restarted rather than adding to the original report total.

Agency ORI Number: (Found on all reports) - This is the unique number assigned our agency.

Agency Name: (Found on all reports) - our agency's name should be recorded in the space provided.

Agency Report Number: (Found on all reports) - Enter assigned case number in the spaces provided. Start at the left of the field and leave the remainder blank.

Original Date: This field will reflect the date you received the call.

Event Data

Reported (Day): The day of the week that the report was received will be designated by using the first three letters of the appropriate day. For example, Monday would appear as Mon.

Date: This field will reflect the date the call was received.

Time (Mil): The time the call was received.

Time Dispatched: The time the dispatcher referred the call to a (Mil) unit for response.

Time Arrived: The time the unit arrives at the incident (Mil) location.

Time Completed: The time the unit notifies the dispatcher that (Mil) action concerning the incident has been completed.

(From) Incident, Day, Date, Time (To) Incident: The left-hand field (day, date, time) is used in all cases where the exact time of the offense is known. When the exact time can sections will be used to denote the possible time span of the time period in which the offense could have occurred.

Offense Number One and Two: This field will serve as a foundation for the offense indicator field and is pre-assigned immediately left of the description field. If multiple offenses are to be recorded, the most serious should be placed in the first entry.

Type: Select the number of the appropriate code from the codes provided. If the offense is both a violation of a state statute as well as an ordinance, the state statute will override the ordinance, and the felony and misdemeanor code will be used. The two (2) most serious violations should appear here in order of their severity.

Incident Description: Paraphrase the type of offense or incident that has occurred.

Attempted / Committed: If the crime was attempted but not committed, then an (A) will be placed in the space provided to the right of the field. If the crime was committed, a (C) code will be used. If this field is not applicable, leave blank.

State Violation: Place the appropriate statute(s) in the fields providing the chapter and section as well as subsections and units when necessary. Refer to the statute Manual to ensure valid data is being provided. Reportable information not falling under a statute, (i.e., Missing Persons, or Foreign Nationals With Diplomatic Immunity as 777.7777.7777).

NCIC / UCR Code: The appropriate NCIC or UCR offenses code for the state statute will be recorded by the Records clerk.

Incident Location: Place the address of the incident in this field.

District: Enter as 01, 02, or 03.

Grid: Enter four digit number of grid.

Shift: Enter shift as 1-day or 2-night.

Zone: Enter as 01, 02, or 03.

Business Name

/ Area Identifier: If the incident occurred at or on the premises of a business establishment or an area commonly referred to by a name such as a sub-division or neighborhood, place that name in this field.

Forced Entry: If a premise is entered, choose the appropriate code from those provided and place in the space provided.

Occupancy: Place the appropriate code in the space provided to the right of this field using the definitions provided below.

Location Type: Place the number of the most appropriate category in the box located to the far right of the field. If multiple locations are possible, the officer should choose the location type that possible contributed to the crime being committed. If a location has several functions housed in one unit, (i.e., Winn Dixie), select the primary target of the offense. If more than one area is targeted, the commercial category would be the appropriate code to use. All numbers less than ten (10) will have a leading zero placed in the left space.

Number of Offenses: The number of offenses that occurred or were attempted during this incident will be recorded here. If greater than one, the two most serious crimes should be recorded by the state statute in the areas provided with the most serious listed first. If the incident is non-criminal in nature, 00 shall be used to designate non- applicable. If the number of offenses are unknown, UK will be used.

Number of Victims: The number of persons and/or businesses that have been victims as a result of the incident(s). If the incident being reported involved no victims, 00 will be used to denote the field is not applicable. If the number of victims is unknown, UK will be used. This is a two character alpha / numeric field, and all figures less than ten will have a leading zero in the left block.

Number of Offenders: The number of persons identified as the perpetrators of the incident(s). If the incident being reported involves no offenders, 00 will be used to designate the field was not applicable. If the number of offenders is unknown, UK will be used. This is a two (2) character alpha / numeric field, and all figures less than ten will have a leading zero in the left block.

Number of Premises Entered: This does not require that the structures be physically separate. Each office, apartment, condominium, warehouse, etc. that is capable of being enclosed separately and is rented, owned or leased by separate individuals will be considered an individual premise. This is a two character alpha / numeric field, and all figures less than ten will have a leading zero in the left block. If no premise were entered, use 00. If the number of premises entered is unknown, UK will be used.

Number of Vehicles Stolen: This will be the number of vehicles stolen as result of the incident(s) reported. This is a two character alpha / numeric field, and all figures less than ten will have a leading zero in the left block. If no vehicles are stolen, use 00. If the number of vehicles stolen is unknown, UK will be used.

Type of Weapon: This field should be used for persons crimes in which weapon or force is used. If the incident is a property crimes or no type of force is used, 00 will be used. Place the number of the appropriate weapon type in the space provided to the right of this field. It

should be noted, if a weapon is named but not seen or used on the victim, the said weapon will be denoted here. If more than one weapon is used, the weapon capable of producing the most danger, injury or damages should be recorded.

Drug Section

- Activity:** Choose the appropriate code and place in this field. If drugs are not involved, leave blank.
- Drug Type:** Choose the appropriate code and place in this field.
- Description:** Give a description of the drug or substance providing its form, for example, capsule color, powdered, liquid or other.
- Quantity:** Give the actual numeric amount of the drug / substance, relating to the units below, in this field.
- Unit:** Choose the appropriate code of unit from the list provided.
- Estimated Street Value:** Give the estimated street value of the drug / substance in whole dollars.

Victim / Witness Section

- Offense Indicator:** (Offense One, Two or Both) - This field will be used to define a victim's / witness's role in, and relationship to, each of the offenses related in the event data fields. If the individual is a victim of offense 1 as reported in the Event Data, the 1 code will be used. If the individual is a victim of offense 2 entered in the Event Data, the 2 code shall be used. If the person was a victim / witness of both offenses recorded, the 3 code will be used to describe their involvement. If the victim / witness is not associated with the offense(s) recorded in the Event Data section, this field should be left blank.
- Victim / Witness Code:** Select the First code you come to that describes the Victim / Witness. If the person is the victim, as well as the witness, only the victim code will be used. The letter of the appropriate code will be placed in the victim / witness code box in the victim / witness section.
- Victim / Witness Number:** Each victim / witness / etc. contained on the report will receive a sequential number. It is important to ensure that no numbers are left out or duplicated. Place the number assigned to each victim / witness in the space provided. If this is a continuation report, this number, if unknown can be renumbered.
- Victim Type:** Select the first code you come to that is appropriate to the victim and place the number in the box provided on the bottom line of the victim / witness section.
- Name / Business:** Last, first, middle or business name.
- Residence Phone:** Complete telephone number including area code.
- Address:** Number and street, apartment number, city, state and zip code. Residential address of the individual, or if a business, the business address will be provided.
- Business Phone:** Complete telephone number including area code and extensions where applicable.

Other Contact Information: Provide another address where the individual may be located, what time the individual is available for interview, whether or not an interpreter is needed for interview, or any other pertinent data that might assist in contacting the individual for follow-up activity.

Synopsis of Involvement: Provide the role of the victim / witness in the incident itself. Where pertinent, provide such information as to the location of the witness as it relates to the offense, what the victim / witness can testify to, or other key information. If Victim Type 1, 2 or 3 (a person), the following portions of this section will be completed. It is important that Law Enforcement Officers that become victims while in the line of duty provide this information.

Race: Place the appropriate letter in the box provided from codes given.

Sex: Place the appropriate letter in the box provided from codes given.

Date of Birth or Age: Month, day, year - Place the date of birth of the victim in this field or provide the age in the last two spaces of the field. If the age is less than ten, place leading zero in the field prior to the age.

Residence Type: Select the appropriate code to match the individual's permanent residency as it relates to your agency's jurisdictional boundaries. Place the appropriate number in the space provided on the bottom line of the person's box. If N/A, 0 must be entered.

0 N/A - Not applicable - This code will be used anytime the victim type reflects the victim as other than an individual.

1 City - If the permanent address of the individual reflects the same city in which the crime occurred, this number will be placed in the box provided.

2 County - If the permanent address of the individual reflects a city different than the location in which the crime occurred, but is within the same county, this number will be placed in the box provided.

3 Florida - If the permanent address of the individual reflects a city that is different than that of the crime and is out of the County but within the State of Florida, this number will be placed in the box provided.

4 Out-of-State - If the permanent address of the individual reflects an out-of-state or foreign country address, this number will be placed in the box provided.

Residence: Place the number of the appropriate status in the STATUS: space provided. If N/A, O must be entered.

O N/A - Not Applicable. This field is to be used if the victim type is any other than an individual.

F Full Year - Resides in Florida for the majority of the calendar year

P Part Year - Resides in Florida for up to six (6) months.

N Non-Resident - Does not maintain an address in the State of Florida.

Extent of Injury: Place the appropriate code in the box provided on the bottom line of the victim / witness section. If N/A, enter N.

N None - if the victim is a business, or if the crime committed did not result in any injury to the individual, this will be the code to use.

M Minor - If the crime committed involved physical contact and caused minor bruises or contusions such as a black eye, bloody nose, etc., this code should be used.

S Serious - If the crime committed resulted in serious or possible serious injury to the individual, this code should be used.

NOTE: Any serious or extensive injury requiring hospitalization or any medical information that is available should be included in the narrative portion of the report as well as noted in this field.

F Fatal - If the individual dies as a result of the crime committed prior to or during the time the report is being generated, this will be the code to use.

Injury Type: Choose the code that is consistent with most serious extent of injury as best can be determined at the scene of the crime. Place all appropriate codes in the order as presented in the spaces provided on the bottom line of the victim / witness section.

00 N/A - This field will be used when the victim is a business or when the extent of injury is none or fatal. No other code should accompany this code.

01 Gunshot - Any injury caused by a projectile powered by energy supplied by an explosive substance.

02 Stabbed - Any deep or open wound resulting from a weapon used to cut or penetrate the victim's skin.

03 Laceration - Any open wound with edges deeply and irregularly cut resulting from a weapon used to rip or tear the victim's skin.

04 Unconscious - This code should be used if the individual is unconscious or loses awareness or conscious control, prior to or during the writing of the report, as a direct result of force used by the offender against the victim.

05 Possible Broken Bones - If a compound fracture has occurred, the broken bone will be visible in the wound. If a simple fracture has occurred, the limb or torso may be disfigured or have localized swelling and pain at the point of the break.

06 Possible Internal Injuries - Internal injuries of the abdominal area are often indicated by the coughing or spitting up of blood, accompanied by a hardening of the abdominal area. Internal injuries to the head are often indicated by fluids coming from the ear and nose and pupils that are unevenly dilated or do not, react to light. Internal injuries also usually accompany compound fractures.

07 Loss of Teeth - Any injury resulting in the loss of an individual's natural teeth (not dentures, bridges or retainers).

08 Burns - Any injury to the skin caused by heat, hot liquids, chemical or incendiary device.

- 09 Abrasion / Bruises - Any bruises or wounds where the skin has been scraped or rubbed off.
- 99 Other - Any type injury not covered by the above categories.

Victim Relationship to Offender: This box will be completed for victims only and will advise the victim's relationship to the offender. Place the appropriate code in the space provided. If there are multiple offenders with differing relationships to the victim, select the closest relationship.

Suspect Section

Offense Indicator: Offense One, Two or Both) - This field will be used to define a suspect's missing, etc. role in and relationship to each of the offenses recorded in the incident type field. If the person was a suspect, etc. of both offenses recorded, the both category will be used to describe their involvement. Place the appropriate code for the offense(s) reported in the event section of the report in which the individual played a key role.

Suspect Code: Using the definitions provided below, select the appropriate code and place in the box provided.

- S Suspect - The term suspect will be utilized when the name of the suspect is known and an arrest is forth-coming or when only the alias and/or description of the perpetrator is known.
- A Arrest - any individual taken into custody in relation to a crime or as a result of a Court Order.
- E Escapee - Any individual who had escaped from lawful custody of a law enforcement officer or incarceration facility.
- M Missing - (Person(s) Report Only) - Any individual whose location is unknown and is reported as lost or has disappeared for unknown reasons.
- B Missing / Recover - Any individual whose location was unknown became known during the same time period.
- R Recovered Missing - (persons Report Only) - Any individual who has been reported missing and their location has become known.
- Z Other - Any individual involved in the case and may be wanted for questioning, that does not fall within the categories of suspect, arrested, escapee, missing or recovered missing.

Suspect Number: Each sequence of suspects, missing, arrestees, etc. contained on the report will receive a sequential number. If this is a supplemental report, you can start the numbering scheme again if you do not have the original report available.

Juvenile: Check this block if the information reported in this section pertain to a juvenile.

Name: Last, first, middle - Place the name of the individual in this field.

Nickname / AKA: If a nickname, alias or street name such as "Lover", or "killer" is used, place the name in this field.

Number Arrested: (Found on the Offense Incident and Narrative Continuation reports) - Place the number of persons arrested with relation to the incident being cleared in this field.

In-Book #: Place Monroe County Sheriff's Office In-book # in this box.

Last Known Address: Give the most current address of the individual. The address will be given by number, street, city, state and zip code.

Residence Phone: Complete telephone number including area code.

Race: Place the appropriate race code from the codes listed.

Sex: Place the appropriate sex in the space provided.

Date of Birth or Age: Month, day, year - Numeric, two digit designators using leading zeros when required or place the age in the last two spaces provided in this field.

Height: This is a three character numeric field and will be given in feet and inches. Leading zeros will be used as required. Space has been provided to give a range as required.

Weight: This is a three character numeric field and will be given in pounds. Leading zeros will be used as required. Space has been provided to give a range as required.

NOTE: The following codes have been provided as the most common and are in no way intended to limit the codes that can be used.

Eye Color: Choose the appropriate color and place in the space provided.

BRO - Brown	BLK - Black
GRY - Gray	BLU - Blue
HAZ - Hazel	GRN - Green
UNK - Unknown	

Hair Color: Select the predominant hair color and place in the space provided. If the individual is not completely bald, write the color of the hair that does exist.

BRO - Brown	BLK - Black
GRY - Gray	BLN - Blonde
RED - Red (Auburn)	WHI - White
UNK - Unknown	

Hair Length: Choose appropriate letter(s) from codes at the bottom of Offense / Incident Report and place in box.

Hair Style: Choose appropriate letter(s) from codes at the bottom of Offense / Incident Report and place in box.

Complexion: Choose appropriate letter(s) from codes at the bottom of Offense / Incident Report and place in box.

Build: Choose appropriate letter(s) from codes at the bottom of Offense / Incident Report and place in box.

Facial Hair: Choose appropriate letter(s) from codes at the bottom of Offense / Incident Report and place in box.

Teeth: Choose appropriate letter(s) from codes at the bottom of Offense / Incident report and place in box.

Speech / Voice: Choose appropriate letter(s) from codes at the bottom of Offense / Incident Report and place in box.

Scars / Marks Tattoos: Describe and provide the location of and the amount of area on the body covered by the scars, marks or tattoos. If more room is needed, write in box "See Describe) Narrative" and fully describe in Narrative of Offense / Incident Report.

Missing Section: In each of the missing fields, two boxes been provided so that two persons may be reported on this form. The top box will correspond to the individual recorded in the first suspect section and the bottom box will be used for the individual in the second suspect section.

Incident Type: Place the appropriate code in the box provided. If the type of incident is unknown at the time of the initial report, use the endangered code to ensure FCIC entry and continued file maintenance.

- 1 Runaway - Any unmarried person under the age of eighteen that runs away from his or her parents, or legal guardian, without their permission.
- 2 Parental - Any removal by the natural or adoptive parent of the child, without endangerment, of an unmarried person under the age of eighteen from the legal custodian of the juvenile
- 3 Involuntary - A person of any age who is missing under circumstances indicating that the disappearance was not voluntary.
- 4 Disabled - A person of any age who is missing and who is under proven physical / mental disability or is senile, thereby, subjecting himself or others to immediate danger.
- 5 Endangered - a person of any age who is in the company of another person under circumstances indicating that his personal safety is in danger.
- 6 Disaster Victim - A person who is missing as a direct result of a disaster.
- 7 Voluntary Adult - Any adult who willingly leaves his or her family without any endangerment to himself/herself or to others.
- 8 Unknown - Any time a person is missing in which the do not fit the above categories, it will be placed in this field.

Foul Play Suspected: Place the appropriate code in the box provided.

Missing Before?: Place the appropriate code in the box provided as stated by the reporting person.

Fingerprints Available?: Place the appropriate code in the box provided.

Photo Available?: Place the appropriate code in the box provided.

Dental Records Available?: Place the appropriate code in the box provided.

NCIC Form Provided?: Place the appropriate code in the box provided.

Date Last Seen: Month, day, year -- If only partial data is known, such as month and year, put this information in this field. If unknown, put unknown.

Time Last Seen: Provide the time using military time. If unknown, put unknown.

Location Last Seen: If an address is known, provide the address. The address will be given by number, street, city, state and zip code.

Accompanied by: Any individual with whom the missing person might be located.

Mental / Physical Condition: If the individual missing has a known mental or medical condition that would endanger their own or other's health or safety, it should be reported in this field. Examples would be if the individual is a diabetic, is a mental patient with violent tendencies, heart problems, etc. would be reported in this field.

Medication Required: If the missing individual requires a continued medication to prevent injury or death, the medication should be placed in this field. Examples of this are Insulin for diabetes, glycerine for heart problems and dilantin for epilepsy.

Doctor / Dentist: Provide the name and telephone number of the doctor / dentist that may have records available for identifying the missing person.

Property Carried: In this field, provide information as to the type of property the individual had in their possession at the time they became missing.

ID Type / Number: In these fields, record any type of identification cards and their numbers the individual had in their possession when they became missing.

Probable Destination: If any idea can be given as to the possible destination of the party such as a friend or relative, place this information in this field.

Name / Address: If a name of an individual or address can be given for the probable destination, provide it in this field.

Transportation Mode: Place in this field the mode of travel that the individual was using when they were reported missing. If a vehicle is involved and enough descriptive information is available, a vehicle module should be completed.

Recovery Information: Choose the appropriate recovery code and place in the space provided to the right of this field.

Vehicle / Vessel / Aircraft

Person Code and Number: Place the appropriate person code and number assigned previously in the persons section of the report to the individual that is most closely associated with the vehicle being reported.

Vehicle Number: Each vehicle / vessel / aircraft recorded on the report will receive a consecutive number. If this is a supplemental report, you can start the numbering scheme again if you do not have the original report available or will be handled as directed by your agency.

Status Code: Choose the most appropriate code using the order in which they are presented as a hierarchy. Place the appropriate code in the box provided to the right of the field.

- 1 Stolen - Any vehicle / vessel / aircraft taken from an individual without their consent.
- 2 Recovered - Any vehicle / vessel / aircraft that has been stolen that has come into the custody or care of the agency.
- 3 Stolen and Recovered - A vehicle / vessel / aircraft that has been stolen and recovered during the same time period will fit in this category.
- 4 Suspicious - Any incident involving the use of a vehicle / vessel / aircraft in a suspicious manner should be recorded using this code.
- 5 Impounded - Any vehicle / vessel / aircraft turned over to or taken by a representative of the agency for protective purposes.
- 6 Abandoned - A vehicle / vessel / aircraft no longer used or maintained. A vehicle left unattended by either the owner, driver or thieves.
- 7 Failure to Return Vehicle - Any vehicle / vessel / aircraft that is take from the owner or individual in care of by legal means and mutual or contractual agreement but is not returned at the agreed upon date or time. Examples would include rental vehicles, vehicles taken for a test drive or a vehicle borrowed and not returned.
- 8 Seized - Any vehicle / vessel / aircraft seized by a representative of the agency as contraband or for evidentiary purposes.
- 9 Other - Any vehicle / vessel / aircraft that comes into the custody of the Office or is of interest to the Office and does not fall in one the above categories or has been damaged or destroyed by arson or criminal mischief should be classified by this code and fully explained in the narrative portion of your report.

Damage Code: Place the appropriate code reflecting the method of destruction or damage.

0 N/A - Not Applicable - Will be used when no damage was done to the vehicle / vessel / aircraft being reported on.

- 1 Arson - Any unlawful and intentional damage, or attempt to damage, any real or personal property by fire or incendiary device.
- 2 Criminal Mischief - Any willful and/or malicious destruction, damage or defacement of public or private property, real or personal.
- 3 During Other Offense - Any damage to a vehicle as a result of a criminal act not covered specifically in another category will be placed in this category.
- 4 Stripped / Theft From - Any time a vehicle / vessel / aircraft is damaged due to removal of parts or for the purposes of entering the conveyance for a theft, it will be placed in this category.

9 Other - Any damage caused by means other than those noted above. This will include accidental or natural acts resulting in damage to property.

Type of Vehicle / Vessel: Choose the appropriate code and place in the space provided in the field.

Year: Year that vehicle / vessel / aircraft was produced.

Make: The manufacturer or company producing the vehicle / vessel / aircraft, (i.e., Ford, Wellcraft, Boeing).

Model: The manufacturer's name for the vehicle, (i.e., Mustang, Sportabout, Skywing).

Style: Enter style of vehicle. Examples are listed below.

Coach	Hearse
Convertible	Limousine
Coupe	Retractable Hardtop
Hardtop	Roadster
Hardtop, 2-door	Sedan
Hardtop, 4-door	Sedan, 2-door
Motorcycle	Sedan, 4-door
Hatchback, 2-door	Pickup
Station Wagon	Touring Car

Enter style of vessel - The boat hull shape can be used in this field. Examples are listed below.

Catamaran	Semi-V
Deep-V	Tri-Hull
Flat Bottom	Tunnel
Pontoon	Round Bottom

Enter style of aircraft - Examples are listed below.

Single Engine - Jet	Single Engine - Prop
Twin Engine - Jet	Twin Engine - Prop
Tri-Engine - Jet	Tri-Engine - Prop
Multi-Engine - Jet	Multi-Engine - Prop
Blimp	Helicopter
Hot Air Balloon	Sailplane
Ultralight / Hand Gliders	

Tag/Registration/ Documentation #: The vehicle / vessel / aircraft number will be placed in this field. If only a partial number is known, enter the known characters and indicate the missing characters with a dash. For example, XKV---- or ---- 214.

For vehicles, the tag number will be used.

For vessels, the registration number assigned by the state where the vessel is in principal use will be used. This number is displayed on the bow (front) of the vessel and consists of two (2) letters designating the State of assignment, a four (4) character numeric followed by one (1) or two (2) letters. Not all the State letters are the State abbreviations. Example: Florida -- FL1234BU, but Massachusetts is MS5678CR.

The documentation number is a federal registration number consisting of six numbers. These numbers will not be displayed on the outside of the vessel, but inside, below decks, on vessels which are usually thirty (30) feet or more in length.

For aircraft, the Federal Aviation Authority's "N" number shall be used. This number is found on the side of the aircraft and can consist of alpha or numeric or alpha / numeric characters.

Registration State: Place in this field the State or Country in which vehicle / vessel / aircraft is registered. Use two letter abbreviations for the State or Country.

Registration Year: Year of expiration or date indicated by validation sticker.

Decal Number: For a vehicle, place the annual renewal decal number in this field. For a vessel, place the number of the annual registration decal in this field.

Tag Type: For a vehicle tag type, use one of the following tag types.

Regular	Dealer
Antique	Diplomatic
Bus	Disabled Veteran
City Owned	Farm Vehicle
In Transit	Dentist
Legislative - Federal	Disabled Person
Motorcycle Dealer	Dune Buggy
National Guard	Exempt
Omnibus	Foreign Government
Reciprocal	Handicapped Person
Special Commercial	Judges
State Owned	Law Enforcement
Truck	Legislative - State
Temporary Tag	Manufacturer
Transporter	Military - Canada
Tractor	Military - USA
Trailer	Personal - Custom
Taxi	Pharmacist
Snowmobile	Physician
Duplicate	Rental Vehicle
Commercial	School Vehicle
Vet of Foreign Wars	All Others
All Terrain VH	US Government
Amateur Radio	Civil Passenger
Consular Corps	Civil Non-Passenger

For an aircraft, use one of the following codes:

Civilian, Passenger (Commercial or Private)

Civilian, Non-Passenger (Commercial or Private)

Military

VIN / Hull

/ Serial Number: For a vehicle, place the vehicle identification number in this field. If the vehicle is not a manufactured item with appropriate numbers, owner applied numbers will be placed in this field as required or applicable. VIN numbers after 1980 should consist of seventeen (17) alpha / numeric characters.

For a vessel, place the hull number in this field. If the boat is not a manufactured item, use an owner applied number if applicable. The hull number is usually located on the outside transom (rear) of the vessel.

For an aircraft, place the manufacturer's serial number in this field.

Value: Place the estimated value of the stolen vehicle / vessel / aircraft or amount of damage to it in this field. Use dollar figures rounding off to the nearest dollar.

Condition: Condition of vehicle / vessel / aircraft at time of theft. Check those that are appropriate.

1 Window Closed

2 Locked

3 Keys in Ignition

Insurance Company: This will be the company that insures the vehicle / vessel / aircraft reported stolen / damaged. If available, also provide the policy number for the vehicle / vessel / aircraft.

Lien Holder: All agencies or persons holding alien on the reported vehicle / vessel / aircraft. If a person, put name in last, first, middle order.

Color: (Top, Bottom) Vehicle / vessel / aircraft color, use the following colors. (Interior color if known should also be indicated in the description field.)

Beige	Gray
Black	Lavender
Blue	Maroon
Blue, Dark	Orange
Blue, Light	Pink
Bronze	Purple
Brown	Red
Copper	Silver
Cream or Ivory	Tan
Gold	Turquoise
Green	White
Green, Dark	Yellow
Green, Light	

Description: (Other Identifying Characteristics, Noticeable Damage) Place any unique features that could be used to further identify the vehicle / vessel / aircraft such as interior color, bumper stickers, damage to the vehicle / vessel / aircraft, paint and rust spots, wheel covers, fiberglass damage, fender guards, etc.

Vessel Name: Place the owner's name for the vessel in this field (i.e., "Monkey Business") as it appears on the vessel. Usually found towards the rear of the vessel.

Length: This field is used to contain the length of the boat. This is a two character numeric field and will be the overall length of the vessel in feet, rounding off fractions to the nearest foot.

Hull Material: Choose the appropriate material from which the vessel's hull is made and place in this field.

Wood	Aluminum
Steel	Fiberglass
Wood / Fiberglass	Other

Propulsion Type: Choose the appropriate method of propulsion for the vessel and place in this field.

NOTE: The following boat types have been provided as the most common and are in no way intended to limit the codes that can be used.

Inboard	Outboard
Inboard / Outboard	Sail with Inboard
Sail with Outboard	Sail Only
Air Propelled	

Boat Type: Choose the appropriate boat type and place in this field.

Air boat

Commercial - Ferry, Oyster Boat, Motor Barge, Towboat, Tug, Clam Dredge, Coaster, Riverboat, Smack Boat, etc.

Cruiser - A boat with, an inboard motor that is at least 25 feet long but no longer than 50 feet.

Houseboat

Hovercraft

Hydrofoil

Hydroplane

Runabout Launch, Motorboat, Outrider, Speedboat, etc.

Sailboat Cat, Catamaran, Cutter, Bark, Schooner, Ketch, Lateen, Lugger, Pinnance, Sloop, Yawl, etc.

Utility Fisherman, Sedan, etc.

Yacht - A boat with an inboard motor that is more than fifty (50) feet in length and is used mainly for pleasure or recreation.

All Other - Aqua Bike or Jet Ski, Dinghy, Dory, Jonboat, Kayak, Lifeboat, Paddle Boat, Rowboat, Scull, Skiff, etc.

- Recovery Address / Geographic Indicator: Provide the address and grid, if known for the location where the vehicle / vessel / aircraft was recovered.
- Date Recovered: Place the date of recovery in this field in (MDY) month, day, year order.
- Value Recovered: Place estimated value of the vehicle / vessel / aircraft at the time of its recovery in this field. Use dollar figures only rounding off to the nearest dollar.
- Recovery Location: Choose the appropriate code to describe the area of recover and place the appropriate code in the space provided. If other is used, provide complete information.
- Recovery Code: Choose the appropriate code and place in the box provided in the right of the field.
- 1 Stolen Local / Recovered Local - If a vehicle / vessel / aircraft is reported stolen within Monroe County's jurisdiction and is recovered within Monroe County's jurisdiction, this code will be used.
 - 2 Stolen Local / Recovered Other - If a vehicle / vessel / aircraft is reported stolen within Monroe County's jurisdiction and is recovered by another agency outside of Monroe County's this code will be used.
 - 3 Stolen Other / Recovered Local - If a vehicle / vessel / aircraft is reported stolen to another agency and is recovered in Monroe County's jurisdiction, this code will be used.
- Original Reporting Agency: Place the name of the agency that initially reported the vehicle / vessel / aircraft stolen.
- Report Number: Place the case number of the originating agency in this field.
- Hold: Check whether or not the vehicle / vessel / air craft is to be held until release is authorized by the law enforcement agency.
- Reason / Authorization: If a hold is placed on the vehicle / vessel / aircraft, give the reason, (i.e., evidence, or the individual authorizing hold in this field)
- Method of Theft: Method of operation used in stealing the vehicle / vessel / aircraft.
- Check the appropriate fields.
- | | |
|---------------|---------------------|
| 0 - N/A | 4 - Steering Column |
| 1 - Keys | 5 - Ignition Punch |
| 2 - Tow Truck | 8 - Unknown |
| 3 - Hot Wire | |
- Components Stripped: Check the appropriate categories of items that were stripped from the conveyance. Make sure the items are reported in the property section using the appropriate property type code for auto parts and accessories.
- | | |
|---------|------------------|
| 0 - N/A | 6 - Transmission |
|---------|------------------|

- | | |
|--------------------|------------------------|
| 1 - VIN Plate | 7 - Engine Parts |
| 2 - Tires / Wheels | 8 - Major Body Parts |
| 3 - Radio / CB | 9 - Tag / Decal Stolen |
| 4 - Battery | 10 - Other - Specify |
| 5 - Interior | |

Towed by: If the vehicle / vessel is towed by an individual or business, place the name of the towing party in this field.

Storage Location: Give the address where the vehicle / vessel is being stored.

FCIC/NCIC: Place the time that Communications entered the vehicle / vessel / aircraft into FCIC/NCIC. This information will be given as soon as possible to Communications upon completing Offense / Incident Report.

Vehicle Acquisition: Enter the Vehicle Acquisition Number in box.

Property Section

Type of Theft: If theft of property occurred in the incident, choose the most appropriate category and place the number in the space provided to the right of the field. This is a two character numeric field, and all numbers less than ten will have a leading zero. If no theft was involved in the incident, place 00 in this box.

Person Code and Number: Place the appropriate person code and number assigned previously in the persons section of the report to the individual that is most closely associated with the item being reported on.

Item Number: Each item on the report will receive a consecutive number if this is a supplement report. You can start the numbering scheme again if you do not have the original report available or as directed by your agency.

Status Codes: Choose the appropriate code as it relates to the item that is being reported on. Place this code in the space provided.

Damage Code: Place the appropriate code reflecting the method of destruction or damage. If N/A, place 0 in box.

Property Types: Choose the appropriate code as it relates to the item(s) that is being reported on and place in the space provided. It should be noted that this is an alpha code rather than a numeric.

Quantity: Place the number of the same items in this section. If serialized articles where the serial numbers are in a consecutive numbering order, the quantity can be placed here and then the serial numbers can be indicated by reflecting the beginning and ending number of the series or placed in the Property Detail Section found on this report. If the item is a serialized article and the numbering series is not consecutive, each item will have to be recorded separately.

Name: Give the common name of the item being reported (i.e., dishwasher, watch etc.)

Brand: Enter the manufacturer's name of the item in this field.

Model Name / Number: Place the company's name and where applicable the model number in this field.

Serial Number: Where applicable, place the serial number in this field. If more than one serial number of the same make and model are being reported, put a note to see the property detail section in this field.

Owner Applied Number: If the owner has put a number on the item through some permanent means or in an area that would not normally be noticed, place the number and its location in this field.

Description: (Size, color, caliber, barrel length, etc.) - Place any unique features that could be used to further identify the item such as monograms, in jewelry the stone cut, in weapons the caliber, finish and barrel length; and noticeable damage, etc. Longer descriptions of items can be continued in the property detail section of this report.

Value: Place the value of the stolen item or amount of damage in this field. Use dollars and cents where known or an estimated whole dollar figure.

Value Recovered: Place the value of the property at the time of recovery in this field. Use dollars and cents where known or an estimated whole dollar figure.

Date Recovered: Place the recovery date in this field in month, day, year order.

FCIC/NCIC: Place the time that Communications entered the property into FCIC/NCIC. This information will be given as soon as possible to Communications upon completing Offense / Incident Report.

Illegal Document Section

This section of the report will be used to document the illegal use of a check, credit card, etc. Theft of such cards should be reported using the property section as required.

Victim Number: Place the appropriate victim number assigned previously in the victim section of the report to the individual that is most loosely associated with the document being reported.

Witness Number: Place the appropriate witness number assigned previously in the witness section of the report to the individual that is most closely associated with the document being reported.

Suspect Number: Place the appropriate suspect number assigned previously in the suspect section of the report to the individual that is most closely associated with the document being reported.

Document Number: Each document number recorded on the report will receive a consecutive number. Some agencies will require a separate report for each document.

Status Codes Choose the appropriate code and place in the space provided.

1 Forged - The making or altering, with intent to defraud, of any writing which, if genuine, might apparently be of legal efficacy or the foundation of a legal liability.

2 Uttered - To utter, as used in a statute against forgery and counterfeiting, means to offer, whether accepted or not, a forged instrument, with the representation, by words or action, that the same is genuine.

- 3 Counterfeit - To forge a completed or printed document; to copy or imitate, without authority or right, and with a view to deceive or defraud, by passing the copy or thing forged for that which is original or genuine.
- 4 Insufficient Funds - If the document is deemed illegal due to funds not being sufficient to support the document's value.
- 5 Account Closed - If the document is written upon an account that has been closed prior to the document being presented for payment.
- 6 Fraudulently Used - Any time a document is used for any other purpose than what it was originally created for it will fall under this category.
- 7 Forged and Uttered - The act of making, manufacturing, altering, possessing, selling or distributing anything false in the semblance of that which is true by words or by actions.
- 8 Counterfeited and Uttered - The copying or imitating of a document without authority and the act of passing it off as a true document by words or by actions.
- 9 Other - Choose this code for any illegal use of a document not fitting in the above categories.

Type:

Place the appropriate code of the type of document used in the space provided.

- 1 Check - A draft drawn upon a financial institution and payable on demand, signed by the maker, or drawer, containing a promise to pay certain sum of money to the order of the payee.
- 2 Credit Card - Any card, plate or other like credit device existing for the purpose of obtaining property, labor or services on credit.
- 3 Money Order - A type of negotiable draft issued by banks, post offices, telegraph companies and express companies and used by the purchaser as a substitute for a check. Form of credit instrument calling for payment of money to named payee, and involving three (3) parties: remitter, payee and drawee.
- 4 Bond / Certificate - A certificate or evidence of a debt on which the issuing company or governmental body promises to pay the bondholders a specified length of time, and to repay the loan on the expiration date.
- 5 ATM Card / Debit Card - An automatic teller card used to access an account within the appropriate bank or a debit card designed to access prepaid services until value of card is exhausted.
- 6 Identification - A document used for the purpose of providing one's identity.
- 7 Prescription - A written order for the preparation and use of a medicine or remedy.
- 9 Other - Any document or item that does not fit within the above categories.

Bank / Card
Issuer:

Place the name of the business or financial institution issuing the document in this field.

- Account Number: Place the account number that has been or will be drawn upon if the document is negotiated.
- Document / Serial Number: Place the identifying number of the individual document in this field for example: check number, invoice number, etc.
- Printed Name: Place the name of the individual responsible for the account as printed on the check or credit card.
- Payable to: Place the name of the individual or business to whom the document is addressed for legal negotiation.
- Face Signature: Place the name of the individual who generated and/or signed the document.
- Endorsement: Place any endorsement data in this field whether an individual or business name, generally appearing on the reverse side of the document.
- Other Names(s): Where applicable, place all other names located on the document in this space. Please identify the role each person placed.
- Service / Property Received: The type of service, merchandise or funds requested by the suspect in attempting to defraud the victim.
- ID Type: Place the type of document(s) used by the suspect to establish proof of identity.
- ID Number: If applicable, place the number of the ID used for identification purposes.
- Document Date: Place the date the document was created or became negotiable in this field. (MM-DD-YY)
- Amount: Place the exact amount of the check, money order, bond certificate or other document in this field. Include the exact dollar and cents figure reflected on the document. (Blank checks or stolen credit cards will be reported value of \$1.00)
- Agency Report Number: Case number.
- Method of Attack: The Method of Attack has been provided as a standardized data collection and retrieval mechanism that would provide or the maintenance and development of a crime analysis function, and sharing of analyzed information on a county and regional basis. The force-choice format allows for transforming raw data on crime, suspects and known offenders into an organized manner for subsequent comparison and analysis. Although some of the information may duplicate the data recorded on the offense forms, it is important to either further define the information or to provide the information at one location to ease the entry for analysis purposes.
- Narrative Section: The narrative portion of this report should be used to describe the incident forming a word picture of the events, in sequence as they occurred. This area is also available for recording non-criminal and service activities.

Administrative Endings

Officer(s)
Reporting: The officer will print his/her name.

ID Numbers: The reporting officer will provide his/her appropriate identification number.

Radio Number: The reporting officer will provide his/her assigned radio number.

Unit: The unit of the agency to which the reporting officer is assigned will be placed in this field.
03 = Patrol

Date: The reporting officer will provide the date the report was completed.

Officer Reviewing: The supervisor reviewing the report will sign or print his/her name in this field.

ID Number: The supervisor will place his/her assigned identification number.

Routed to: If the report is routed to another unit for review, the unit will be placed in this field.

Referred to: If the report is referred to another unit for follow-up or processing, the unit will be placed in this field.

Assigned to: If the offense / incident is assigned to an individual, the individual assigned will be placed here.

By: The individual making the assignment recorded above will place his/her identification number, name or initials here.

Date: The date the case was reviewed, routed / referred or assigned will be recorded in this field.

Case Status: (Found on the Offense Incident and Narrative Continuation reports - This field has been provided for your agency's case status reflecting whether a case is pending, open, inactive, closed, etc.

Using the CIS definitions, check the appropriate box provided. This field should be completed or reviewed by someone familiar with the CIS definitions of clearances.

Cleared by Arrest: For CIS purposes, an offense is "cleared by arrest" when at least one person is (1) arrested, (2) charged with the commission of the offense, and (3) turned over to the Court for prosecution (whether following an arrest or Court summons served by a Deputy). Arrest of a principal, aider, abettor or conspirator permits a clearance by arrest even if charged with a lesser offense.

Exceptional Clearance: If all of the following questions can be answered "yes", then the offense may be listed as exceptionally cleared:

Has the investigation definitely established the identity of the offender?

Is there enough information to support an arrest, charge and prosecution?

Do you know the exact location of the offender so that you could take him into custody now?; and

Is there some reason beyond law enforcement control that stops you from arresting, charging and prosecuting the offender?

Unfounding of Offenses: A reported offense that investigation shows to be false or baseless should be unfounded. Justifiable homicides should be unfounded. Cases that are upgraded to the next higher index crime will be unfounded.

Adult or Juvenile: (Found on the Offense incident and Narrative Continuation reports) - If the offense is cleared by an arrest or exceptionally, the offender will be identified as an adult or juvenile and the appropriate code placed in the space provided at the right of the field.

Date Cleared: (Found on the Offense Incident and Narrative Continuation reports) - The date the offense is cleared will be placed in this field.

Exception Type: (Found on the Offense incident and Narrative Continuation reports) - If the offense is cleared by exception, this field will be required to explain why the case was cleared using the most appropriate exceptional clearance type.

- 1 Extradition Declined - Any time an agency is notified that a person on which they have a warrant has been arrested by another law enforcement agency and extradition is declined by either agency, this type of clearance will be recorded.
- 2 Arrest on Primary Offense, Secondary Offense Without Prosecution - When an arrest is made on an individual who has committed several offenses that can be cleared; however, the State Attorney or the agency decides not to prosecute on some of the cases, this type of exceptional clearance will be recorded for those cases. A clearance by arrest can be recorded for all cases than are to be prosecuted.
- 3 Death of the Offender - When the perpetrator of the offense dies during the commission of the crime or prior to his/her identity becoming known, this type of exceptional clearance will be recorded.
- 4 Victim / Witness Refused to Cooperate - This type of exceptional clearance can only be used when the identity of the offender is known and the only reason why the case did not proceed through the judicial system was due to failure of key persons to cooperate in prosecuting the defendant.
- 5 Prosecution Declined - This type of exceptional clearance can only be used when the agency has identified the offender and has sufficient evidence to prosecute the individual, but prosecution is not pursued in the case for reasons other than those provided for above.
- 6 Juvenile / No Custody - This type of exceptional clearance will be recorded when a juvenile is identified as the perpetrator and the agency either handles the matter in-house or through the Department of Children and Family Services and no prosecution is required.

7. Property Receipt Form

Used to record, identify and receipt all property or evidence impounded, recovered or seized except motor vehicles. It is used also to record subsequent transfers of property or evidence.

a. Categories of Property

Any property acquired under the provisions of this General Regulation shall be divided according to the following categories and a separate Property Receipt Form or Motor Vehicle Acquisition / Receipt Form shall be initiated for each category of property.

- 1) Currency or negotiable instruments
- 2) Motor Vehicles
- 3) Weapons electric weapons or devices or arms
- 4) Property regulated by Chapter 562, Florida Statutes, (Beverage Law)
- 5) Property regulated by Chapter 893, Florida Statutes, (Florida Comprehensive Drug Abuse Prevention and Control Act)
- 6) Property regulated by Chapter 849, Florida Statutes, (Gambling Law)
- 7) Livestock and other animals
- 8) Crime scene evidence other than the categories above
- 9) Other property which does not fall within the purview of the preceding categories
- 10) Civil Seizures by Court Order

EXAMPLE: If drugs and stolen property were taken into custody - two (2) receipts would have to be filled out. One detailing the drugs and the other detailing the stolen property.

b. Directions for the Completion of the Property Receipt Form

Case Number: Entry case number corresponding to Offense / Incident or SupplementReport.

For Property

Division Use Only: Used by Property for administrative purposes.

Date Impounded: Enter date of impoundment

Time Impounded: Enter time of impoundment

Found/Recovered

Lab Evidence Check the appropriate Block. When evidence is taken from a juvenile, enter the printed

Trial Evidence: word "JUVENILE" beside checked block.

Disposition: Check the appropriate Block.

Primary Charge: Enter the highest charge in the case.

Division

/ Identification #: Include division and ID number.

Received by:

Reason:

Date and Time: To be completed each time property is removed from the property division.

8. Vehicle Acquisition / Receipt

The Vehicle Acquisition / Receipt is used to record, identify and receipt all motor vehicles impounded, recovered or seized. It is also used to record subsequent transfers of motor vehicles.

a. Instructions For Completion

1) The Motor Vehicle Acquisition / Receipt Forms are printed with numbered sections and coincide with the instruction in the following subsection.

2) Each of the several sections or blocks will be completed and used for the recording of the following indicated information.

Block (1): Will be used to denote the identifying characteristics of the motor vehicle acquired and the registration affixed. This is to be completed by the acquiring individual.

Block (2): Will be used to denote the date, time and results of FCIC/NCIC inquiry and whether an arrest was made. This is to be completed by the acquiring individual.

Block (3): Will be used to denote and record the case number. A case number shall be issued for every acquisition of a motor vehicle. This is to be completed by the acquiring individual.

Block (4): Will be used to denote the name and address of the operator and registered owner of the motor vehicle. This is to be completed by the acquiring individual.

Block (5): Will be used to denote the general type of motor vehicle acquired, i.e., auto, truck, motorcycle, etc.) This is to be completed by the acquiring individual.

Block (6): Will be used to denote and record the signature of the owner / operator and, where applicable, the receiving person s signature. This is to be signed by the individuals indicated on the form at the direction of the acquiring individual.

Block (7): Will be used to denote the action taken. This is to be completed by the acquiring individual. This block will not be used to denote any subsequent action from the time of acquisition.

Block (8): Will be used to record inventory of the motor vehicle and its contents. This is to be completed by the acquiring individual.

Block (9): Will be used to denote whether a motor vehicle is requested to be held and the reason therefore. This block will be completed for all motor vehicles seized for evidentiary purposes, physical evidence processing, or court action (forfeiture). This will be completed by the acquiring individual.

Block (10): Will be used to record the signature of the owner / operator indicating a concurrence with the inventory in Block (8). This is to be signed by the individual indicated at the direction of the acquiring individual.

- Block (11): Will be used to denote and record the signature of the acquiring individual, ID number, district to which assigned and date and time of acquisition. This will be completed by the acquiring individual.
- Block (12): Will be used to denote and record the name, signature, name of firm, date and time of the towing / storage firm agent's concurrence of the inventory and acceptance of the motor vehicle. This will be completed by the indicated individual at the direction of the acquiring individual.
- Block (13): Sets forth general instruction to vehicle owners and towing / storage firms. Authorization to release will be completed by the acquiring individual.
- Block (14): Will be used to denote and record the signature, etc., of every individual who enters the chain of custody except the acquiring individual. This will be completed by the individual entering the chain of custody.
- Block (15): The original receipt will be returned from the impounding agency for final disposition. There is no record in Property when a vehicle is released to owner, sold, or junked by the towing agency.

9. Uniform Traffic Citation

a. Directions For Completion

County: Write in Monroe County.

Agency: Place an "X" in the "S.O." block to show the issuing agency.

Date of Offense: Print legibly the day of the week. The day of the week may be properly abbreviated. EXAMPLE: Mon., Tue., Wed., Thur., Fri., Sat., Sun. Then, write in numerics the month, day and year. EXAMPLE: Write 03-01-78 for March 1, 1978. After the date information, enter the time that the offense occurred indicating a.m. or p.m.

Violator's Name: Show the name of the violator exactly as it appears on his driver's license. If it is an out-of-state license with the last name listed first, change the order and show the name of the violator with the first name first, then the middle name or initial and den the last name. EXAMPLE: John Edward Doe or John E. Doe. In the event the violator does not have a driver's license, then show his FULL name. In the event the violator has an expired driver's license, show the name as it appears on the expired license.

NOTE: If the violator has changed has or her name since the issuance of the license, then the correct name should be shown upon the citation. Show the difference in the legal name and that shown on the driver's license in parenthesis. EXAMPLE: Jane Adams (Brooks). Her maiden name was Jane Adams which is on her current license. Her new (legal) name is Jane Adams Brooks.

Street Address: Show the violator's current street address. EXAMPLE: 518 North Main Street. Always ascertain from the violator his current address since there will be many cases in which he will have changed addresses since the issuance of his license. Check box if address is different than on license.

NOTE: If the violator is holding a Florida Driver's License and his correct address is different from that shown, advise the violator to notify the Department of his change of address.

City and State: Show the city and state in which the violator resides. Proper abbreviation of state is permissible. Show the Zip Code number. EXAMPLE: Key West, Florida 33040.

Birth Date: Enter full date of birth by MM/DD/YY (month / day / year) using numbers only. EXAMPLE: 04-16-44.

Race: Show the violator's race. Example: White (W), Black (B), Indian (I), Oriental (O), and Cuban (C). In the event the subject is not one of these, then you are to write-in the race. Abbreviations will be necessary due to space allocated. Example: Mexican (Mex).

Sex: Write (M) if Male and (F) if Female.

Height: Show the violator's height as shown on driver's license.

Driver's License #: Enter the driver license number as it appears on the license using the blocks on the top line. The Florida Driver License carrying driver's picture will have eleven numbers preceded by one alpha designation which is always the first letter in the driver's last name. If the driver license was issued by another state and more space is needed for entering the Numbers, use the extra blocks on the following line.

1) If the violator presents an expired license, enter the license number in the space provided and write in the word "expired" in the extra blocks below.

NOTE: On all Florida photo driver licenses (issued after 12/01/73), do not confuse the audit number which is in the top left corner in large numbers with the driver license number which is immediately below the audit number. All non-photo driver licenses issued prior to 12/01/73 will have fourteen numbers preceded by one alpha designation which is the first letter in the driver's last name.

State: Enter the state which issued the driver license.

Proper abbreviation of state is permissible. EXAMPLE: FL (Florida), GA (Georgia), etc.

Type: Enter either "operator", "chauffeur", or "restricted". The type is located in the upper right hand corner of the photo driver license or in the upper center portion of the non-photo license.

If the violator is holding a temporary permit, enter the permit number in place of the driver license number and write in the word "temporary" in the block for type.

If the violator does not have a drivers license, then write in the word "none" in the block for type.

Proper abbreviation of type of license is permissible. EXAMPLE: Op. (Operator), Chau. (Chauffeur), Res. (Restricted), Temp. (Temporary).

Year

License Expires: Enter the year license expires.

Year Tag Expires and State of Issuance: Show the year the tag expires. Next, show the name of the state that issued the registration (Tag). EXAMPLE: '79 Florida

Registration Number: Show the registration number (Tag) of the vehicle. EXAMPLE: ABC 123

Year of Vehicle: EXAMPLE: 1978.

Make of Vehicle: Show the make of the violator's vehicle. EXAMPLE: Buick, Ford, Chevrolet, Honda.

Style of Vehicle: Indicate whether the vehicle is a two-door, four-door, pickup truck, bus, truck, tractor-trailer, motorcycle, van, motorhome, etc.

Color of Vehicle: Show the color of the vehicle. General color designation is requested rather than the manufacturer's color name. If the color of the vehicle is two-tone, show both colors. EXAMPLE: Blue, Black, White / Blue

Owner: Enter the complete name of the owner of the vehicle. (Question the driver loosely about ownership.) Fill in the owner's correct address. Avoid post office box numbers, if possible. Use street addresses or rural route addresses. In the event the owner and driver are the same, indicate in the "owner" block the wording, "same as driver". The space marked "owner's address / or driver's additional address" can be used to show business address or phone of the driver.

If unable to determine the owner's name and address, indicate in the "owner" block the word "unknown".

Location: Show the state road number upon which the violation occurred. If not a state road, then list the county road number. If not a county road, then list the name of the street. If not named, then show county road or street unidentified. Next, give the distance and direction from the nearest town, then list the county and state. EXAMPLE: US 1, 3 miles North of Tavernier in Monroe County, Florida.

If the violation was within a city, enter the name of the city and county in the space provided. If in unincorporated Monroe County list the familiar name such as Big Pine Key, Rock Harbor, etc.

Charges(s): Place an "X" mark in the block on the left side of the violation committed. For example, if the charge is "Following Too Closely", simply place an "X" mark in the applicable block. Only one block should be checked.

If two charges are made against the same defendant, they must be on separate citations.

If the charge is "Violation of Right-of-Way", place an "X" mark in the applicable block and show in parenthesis in the "Other Violations" section the type of violation. EXAMPLE: (to emergency vehicle), (at yield intersection).

If the charge is "Unlawful Speed", place an "X" mark in the block on the left side of the words "Unlawful Speed". Show the speed of the violator's vehicle at the time of offense or the speed at which the vehicle was clocked. Next, show the speed applicable.

If the violation committed is "Unlawful Speed in a Posted Zone", place an "X" mark in the block on the left side of the words "Unlawful Speed". Show the speed of the violator's vehicle at the time of the offense and the speed applicable. Next, show (In a Posted Zone) in parenthesis in the "Other Violations" section.

Place an "X" in the appropriate block to show if the speed limit violation occurred on an interstate road or on a 4-lane highway with 20-foot median outside a business or residential district.

NOTE: The speed information is important due to the number of points assigned to a violator's driver license upon conviction depends on the number of miles per hour the vehicle was traveling or being driven over the lawful speed.

If the violation committed is "Driving While Under the Influence of Alcoholic Beverages, narcotic drugs, barbiturates or other stimulants.

If the violation committed is "Improper Use of Driver License", show charge in "Other Violations" section. Next, show how the license was improperly used. Example: "Improper Use of Driver License" (displaying another's).

Arrest Using
Airplane or Radar: When the airplane, radar or VASCAR units are used in making any arrest, the appropriate charge is to be indicated in the usual way as explained above. In addition, the word (Aircraft) or (Radar) in parenthesis is to be placed in the "Other Violation" section. After showing the word, then list in parenthesis the numerical code applicable: (1) Following, (2) Rear, (3) Opposite, (4) Intersection, (5) Stationary, (6) Other.

Other Violations
or Comments: Violations not listed on the citation must be placed in this space. Do not abbreviate. If a listed violation has been checked and the officer would like to add additional comments, care must be taken that the checked violation and comments are not conflicting so that the comments cannot be construed as an additional charge.

State Statute: Place an "X" mark in the block next to "State Statute". The "Local Ordinance" section is for municipalities' use.

State Statute
Section: List the statute number applicable to the violation committed.

Type
Accident Case: Enter the total dollar amount of all property damage including damage to all motor vehicles as well as other property damage. In addition to entering the amount of property damage, place a check in the block applicable for the type of accident case to show whether personal injury or fatal injury resulted from the accident. Check only the one considered most serious. Enter a zero in the property damage block if there was no property damage.

Arrest
(Delivered to): If the violator is arrested by a Sheriff's Deputy check the block and then show: Monroe County Sheriff's Office, Station 2, or Monroe County Jail.

Date of Arrest: If date of arrest is other than the date of offense, show date of arrest. List month, day and year. EXAMPLE: Driver of vehicle involved in hit and run accident apprehended on following day after accident.

Troop or Unit: Print your District Assignment, (i.e., District I, II, III).

Signature and Identity of Officer: Sign your name legibly. Should your signature be illegible then print your name below your signature. Show appropriate rank.

Badge Number: Print your radio ID Number.

Identification #: Print your permanent Office ID number.

Court Information: Must be filled out completely on every citation written regardless of whether the summons is payable or requires a Court appearance. Give date and time the court appearance is scheduled and name of court.

Criminal Violation or Infraction: In every case, the appropriate block must be checked to show if the case is a criminal violation and court appearance is required or if the citation is for an infraction and court appearance is required or if the citation is for an infraction which does not require appearance in court.

NOTE: If the case for a criminal violation and Court appearance is required, the back of the defendant's copy of the citation is not to be completed. It should be explained to the defendant that court appearance is required and the information on the back of the defendant's copy of the citation is to be disregarded.

If the citation is for an infraction and Court appearance is required, the same procedure should be followed as shown for a criminal violation.

If the citation is for an infraction which does not require appearance in Court, the backside of the defendant's copy of the citation is to be completed. Check the block applicable in the "Instruction" section of the defendant's copy to show if the infraction was a bicycle or pedestrian violation or if the infraction was a non-moving violation or moving violation. Options available to the defendant should be thoroughly explained, (i.e., electing to attend drive improvement school or requesting a court hearing rather than paying the prescribed penalty).

Signature of Defendant: In the space provided on the bottom line, have the violator sign his signature. NOTE: In order for a Notice to Appear (Summons) to be valid, the violator's signature must be affixed.

The defendant's signature shall be obtained in all cases. If the defendant is unable or refuses to sign his signature, show in the spaces provided for signature "Refused to Sign" or "Unable to Sign".

10. Field Contact Card

a. The Field Contact Card System has been developed as a tracking system for

1) Routine field contacts

2) Suspicious persons

- 3) Known offenders
- 4) Suspects
- 5) Potential criminal offenders
- 6) Suspicious vehicles
- 7) Any person, vehicle, boat or plane the Deputy or investigator wishes to document at a location, time and date
- 8) Memorandums of information received ("MOIR") and gang information (to be submitted directly to the Intelligence Officer)

b. Instructions for Completion

- 1) The card shall be printed using a black ball point pen.
- 2) A Deputy or Investigator should also remember that it is not necessary to have physical contact with a suspect in order to fill out a field contact card. If the identification of the subject is known, filling out the field contact card serves to document his/her presence at a location, and may become an investigation lead in the event an offense is discovered at a later date. In addition, this information may be entered into the intelligence system for tracking purposes.
- 3) A vehicle can be field contact documented, which is especially helpful in determining trends in the presence of certain vehicles connected with a location, perhaps suspected of drug dealing or for surveillance. It would be possible to turn the hours on a stakeout into meaningful statistics on vehicles easily inquired upon at a later time for charting patterns and routes for later investigation and use.
- 4) Filling out the field contact card:
 - a) Case #: enter the Sheriff's Office case number, if one exists.
 - b) Contact Number: This is a unique number used to identify the field contact for computer entry purposes; this number is preprinted on each card.
 - c) Name: Enter last name (in capital letters), first name, and middle initial.
 - d) Address: The subject's home address.
 - e) Hair Length: Mark the most appropriate length to describe the subject's hair.
 - f) Hair Color: Mark the appropriate color of the subject's hair.
 - g) Hair Style: Mark the appropriate hair style of the subject.
 - h) Nationality / Ethnicity: mark the appropriate nationality or ethnic background.
 - i) Date of Birth and Age: Enter the month, date, and year of the subject's birth and his/her current age.

- j)** Race: Mark the box which best describes the subject.
- k)** Sex: Mark the box that appropriately identifies the sex of the individual.
- l)** Height: Indicate the approximate height of the subject.
- m)** Weight: Indicate the approximate weight of the subject.
- n)** Complexion: Mark the box that most accurately describes the subject's skin complexion.
- o)** Build: Mark the box which most accurately describes the subject's body build.
- p)** Eyes: Mark the box which describes the color of the subject's eyes.
- q)** Face: Mark the box which describes any facial features.
- r)** Phone: Indicate the subject's telephone number with area code.
- s)** Driver's License Number: Write in the subject's driver's license number.
- t)** St: Write in the state of issuance of the subject's driver's license.
- u)** SSN: Write in the subject's Social Security number.
- v)** Scars, Marks, or tattoos: Indicate any scars, marks, or tattoos observed or advised of.
- w)** Clothing: Describe the clothing worn by the subject.
- x)** Location of Interview: Indicate the location where the field interview was conducted.
- y)** Date: Indicate the date of the field interview.
- z)** Time: Indicate the time of the interview in 24-hour time.
- aa)** Grid: Indicate the grid where the field interview was conducted.
- bb)** Division: Indicate the division where the field interview was conducted.
- cc)** Veh / Ves Color: Indicate the color of top and bottom of the subject's vehicle.
- dd)** Yr: Enter the year of the vehicle.
- ee)** Make: Indicate the make and year of the vehicle involved.
- ff)** Model: Indicate the model of the vehicle involved.
- gg)** Style: Indicate the body style of the vehicle involved.
- hh)** Tag Number: Indicate the tag number of the vehicle involved.
- ii)** Yr: Indicate the year of the tag on the vehicle involved.

- jj)** ST: Indicate the state where the vehicle tag was issued.
- kk)** Indicate Veh. Damage: This is a legend, with which the blocks in “mm)” below should be marked.
- ll)** Veh / Ves Remarks: Indicated any information for vehicle / vessel not provided for.
- mm)** Veh. Damage: Mark the appropriate box(es) using the legend in “kk)” above to identify the location(s) of damage to the vehicle.
- nn)** Yr: Indicate the year of the vessel.
- oo)** Make: Indicate the make of the vessel.
- pp)** Model / Hull: Indicate the model or hull type of the vessel.
- qq)** Reg. No.: Indicate the vessel registration or documentation number.
- rr)** Length: Enter the length of the vessel in feet.
- ss)** Reason for Interview: Indicate why contact was made with the subject.
- tt)** Person Receiving MOIR: Indicate the member to whom the MOIR is being sent.
- uu)** Subject Status: Indicate the status of the person being interviewed.
- vv)** Officer: Signature of the officer conducting the interview.
- ww)** Division: The conducting officer’s assigned division.
- xx)** ID No.: Officer’s four (4)-digit identification number.
- yy)** MOIR: If this information is for MOIR purposes, list the information to be passed on in the space provided on the back of page three(3) of the Field Contact Card, and send to the Intelligence Officer.