Zilwaukee Police Department

Citizen Incident Worksheet

You may call the Zilwaukee Police Department at (989) 755-0931 for your case number a week after you drop this report off.

INSTRUCTIONS: Please print or write legibly. If the information requested does not apply, please indicate that by using "N/A".

FAILURE TO COMPLETE THIS FORM IN ITS ENTIRETY WILL RESULT IN NO POLICE REPORT BEING WRITTEN.

FILING A FALSE REPORT IS A FELONY AND PUNISHABLE BY UP TO 4 YEARS IN PRISON

Incident Date_____ Today's Date _____ Incident Time_____

Incident Location (Where did incident happen?)_____

Your Last Name_____ First Name_____ Middle_____

Birthday_____ Address_____ City_____

State_____ Zip_____ Telephone #_____ Sex_____ Race_____

PROPERTY INFORMATION: Please provide a full description of the stolen or damaged property to include serial or model numbers, if known. Also, please provide a value for stolen items and a damage estimate for damaged property.

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Insurance Company Name_____ Policy#_____

SUSPECT INFORMATION: If a suspect(s) is known, please provide as much information as possible, including any vehicle information. If there is more than one suspect, use the narrative section on the reverse to provide further info.

Suspects Last Name_____ First Name_____ Middle_____

Birthday_____ Address_____ City_____

State_____ Zip_____ Telephone #_____ Sex_____ Race_____

What is your relationship to the suspect _____

Narrative/Witness Information: Please relate, in your own words, what happened. Be as complete as possible. If you need more space, we will provide you with an additional sheet.

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Witness Information: (Name, Address, Telephone, Birthday/Age, etc.-If Known)

1._____

2,_____

3._____

4._____

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Print Your Name Signature Today's Date