

## NEIGHBORHOOD WATCH

The Neighborhood Watch program is the most effective means available for keeping crime out of our neighborhoods. It relies on the best crime fighting tool ever invented – a good neighbor. Fortunately, good neighbors are found everywhere. They live in houses and apartment buildings, in urban, suburban and rural areas.

When neighbors work together with law enforcement, one of the best crime fighting teams around is created. Be a good neighbor and make your community safer from criminals by starting a Neighborhood Watch program. Remember, the battle against crime will not be won by people acting on their own.

Scotia's Neighborhood Watch program was started with help from the Humboldt County Sheriff's Office.

For more information on Scotia neighborhood Watch program and to join forces with your neighbors, contact Fire Chief John Broadstock at 764-4322.

To report suspicious activity or submit a crime report, please utilize the attached form and submit it to Chief Broadstock or the Town of Scotia offices.

# TOWN OF SCOTIA NEIGHBORHOOD WATCH

## Suspicious Activity / Crime Report

Was this a (check one):  CRIME  SUSPICIOUS ACTIVITY

Briefly describe what happened: \_\_\_\_\_

When did it happen? DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

Where STREET: \_\_\_\_\_

did it ADDRESS: \_\_\_\_\_

happen? NEAREST CROSS STREET: \_\_\_\_\_

### SUSPECT DESCRIPTION

Sex (check one):  MALE  FEMALE

Age: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Race: \_\_\_\_\_

Hair Color: \_\_\_\_\_ Mustache, beard or sideburns: \_\_\_\_\_

Glasses: \_\_\_\_\_ Color of Eyes: \_\_\_\_\_ Complexion: \_\_\_\_\_

Tattoos, amputations, scars and/or other distinguishing marks: \_\_\_\_\_

Noticeable accents or special characteristics of speech: \_\_\_\_\_

### CLOTHING

Shirt: \_\_\_\_\_ Coat: \_\_\_\_\_ Trousers: \_\_\_\_\_

Shoes: \_\_\_\_\_ Tie: \_\_\_\_\_ Hat: \_\_\_\_\_

Rings, bracelets, necklaces or earrings: \_\_\_\_\_

### WEAPON

Handgun: \_\_\_\_\_ Rifle: \_\_\_\_\_ Knife: \_\_\_\_\_ Club: \_\_\_\_\_ Other: \_\_\_\_\_

### DESCRIPTION OF VEHICLE

Make: \_\_\_\_\_ Year: \_\_\_\_\_ Body style: \_\_\_\_\_ Color: \_\_\_\_\_

License Number: \_\_\_\_\_ State: \_\_\_\_\_ (if unable to identify state, color of license): \_\_\_\_\_

Identifying dents, scratches, wheels, markings: \_\_\_\_\_

### ANSWER THE FOLLOWING

Number of subjects: \_\_\_\_\_ What they said: \_\_\_\_\_

Direction of departure: \_\_\_\_\_

Names and addresses of other witnesses: \_\_\_\_\_

Your name: \_\_\_\_\_ Your phone: \_\_\_\_\_

Your address: \_\_\_\_\_