



# CITIZEN'S REPORT OF PROPERTY CRIME

**Directions:** This form is provided for the citizen of Canyon County who wishes to make a police report of a crime against property and understands that an active investigation in this case is unlikely.

**There are four conditions for use of this report.**

- ① To simply record a crime: at the request of an insurance company or for informational purposes when no further investigation is likely to follow.
- ② There is no suspect or any evidence which might lead to a suspect in this case.
- ③ When the total value of property generally does not exceed \$1000.
- ④ No physical injury or assault resulted during this crime.

**All other circumstances require an officer's report.**

**PLEASE PRINT**

<b>For Sheriff's Department Use only</b>			
Report Date		Case #	
Crime			
UCR code	Incident	Action	Area

Date and Time it Occurred		Date and Time Discovered		Occurrence (check one) <input type="checkbox"/> day <input type="checkbox"/> night <input type="checkbox"/> unknown						
Location of Occurrence ( Address or directions to)										
Describe Property Owner CHECK ONE <input type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Religious				Name of Business/Organization						
CHECK ONE <input type="checkbox"/> Property owner <input type="checkbox"/> Agency representative		Last Name,		First Name		Middle	Sex	Race	Age	Date of Birth
Social Security Number		Property Owners Address				City & Zip Code		Phone Number		
CHECK ONE BELOW	<b>Type of property taken, damaged or lost;</b> (indicate size, color, Manufacturer, model number or anything that might help in identifying the item)					serial number		Loss Value		
<input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Lost	1.							\$		
<input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Lost	2.							\$		
<input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Lost	3.							\$		
<input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Lost	4.							\$		
<input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Lost	5.							\$		
<input type="checkbox"/> Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Lost	6.							\$		
Name of insurance Company				Phone #		Notified <input type="checkbox"/> yes <input type="checkbox"/> no		Total Loss		

**THIS REPORT IS NOT VALID  
UNTIL SIGNED IN SIGNATURE BLOCK ON BACK**

Describe missing or damaged property above. Tell what happened below in your own words. Explain how you believe the crime was committed and list any information that you feel may be of value.


**Please read carefully before you sign below:** Providing false information to police or government agencies is a misdemeanor in violation of **IDAHO CODE 18-5413**. If this report is false and used in conjunction with making a false or fraudulent insurance claim, it is a felony, in violation of **IDAHO CODE 41-293** punishable by up to 15 years in prison and a \$15,000 fine.

**By my signature in this block** I certify that I have read and understand the above statement and I also certify that all information I have provided is true and correct to the best of my knowledge and that I will prosecute and/or testify in this case.

Signature

When you have completed this form please mail it to:

**Canyon County Sheriff's Office**  
**ATTN.: Records**  
**1115 Albany**  
**Caldwell, Idaho 83605**

If you have questions please call Sheriff's records Monday - Friday 8am - 5pm at 454-7488

<b>DO NOT USE</b>	Processed by _____ Badge # _____ Date _____
	Route Copy to <input type="checkbox"/> <b>Patrol</b> <input type="checkbox"/> <b>CID</b> <input type="checkbox"/> <b>File</b> <input type="checkbox"/> <b>Other</b> _____ <input type="checkbox"/> <b>Close Inactive</b>