

# LITTLETON POLICE/COLD INCIDENT REPORT

Date \_\_\_\_\_

Case Number \_\_\_\_\_

This crime report form is for the convenience of persons who do not wish to speak to an officer, have no suspect information and/or may be making the report for insurance purposes. Although an officer will not investigate this crime, it assist in identifying the types and locations of crimes committed in Littleton. All property with serial numbers will be entered in the Colorado Crime Information Computer. Use the Case Number (above) when referring this crime to your insurance company.

**Location Where Crime Occurred** (If exact address unknown, give approx. street location, i.e. 5600 Block S. Broadway)

\_\_\_\_\_

**When Did Crime Occur** (Indicate dates(s) and time(s) range) \_\_\_\_\_

## Victim Information –

Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Race \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home/Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature of Victim/Complainant \_\_\_\_\_ Taken by Clerk \_\_\_\_\_

## Complainant Information – (if different from Victim Information)

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home/Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Business Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Property** – Please list each item stolen and/or damaged. Use additional sheets if needed.

1) Brand name \_\_\_\_\_ Description (color, size, markings) \_\_\_\_\_

Value \_\_\_\_\_

Serial # \_\_\_\_\_ Model \_\_\_\_\_ CCIC \_\_\_\_\_ NCIC \_\_\_\_\_

2) Brand name \_\_\_\_\_ Description (color, size, markings) \_\_\_\_\_

Value \_\_\_\_\_

Serial # \_\_\_\_\_ Model \_\_\_\_\_ CCIC \_\_\_\_\_ NCIC \_\_\_\_\_

3) Brand name \_\_\_\_\_ Description (color, size, markings) \_\_\_\_\_

Value \_\_\_\_\_

Serial # \_\_\_\_\_ Model \_\_\_\_\_ CCIC \_\_\_\_\_ NCIC \_\_\_\_\_

**Narrative** – Briefly describe what happened and where property was when stolen/damaged:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

A copy of this report will be mailed to you at the mailing address above. Your case# will be listed at the top of the report at that time. Case numbers are normally available by phone, after noon the following day. However, in some cases, the report may not be available until a later time. If there is any further information on this report or any questions, call 303-795-3880, Mon-Fri between 8am and 5pm.