

SURF CITY POLICE DEPARTMENT VICTIM PROPERTY LOSS REPORT

DEPARTMENT Surf City	OPI NO. NJ 0153100	DEPT. CASE NO.	PROS. CASE NO.	INCIDENT NO.
VICTIM NO.	PRINT RANK / OFF. NAME	BADGE NO.	DEPARTMENT PHONE NO. - EXT. (609) 494-8121	
ABOVE TO BE COMPLETED BY POLICE PERSONNEL				
VICTIM INSTRUCTION SECTION				

THE ITEMS STOLEN SHALL BE LISTED BELOW AS SOON AS POSSIBLE. THIS WILL INCLUDE INFORMATION AS TO QUANTITY, MAKE, MODEL, OWNER APPLIED NUMBERS (OAN), SERIAL NUMBERS, DESCRIPTION OR ANY OTHER PERTINENT INFORMATION THAT WOULD SIMPLIFY IDENTIFYING THE STOLEN ARTICLES. LIST THE CURRENT MARKET VALUE OF THE ARTICLE(S) STOLEN IF KNOWN, OR ESTIMATE VALUE AND TOTAL SAME. IF ADDITIONAL SPACE IS NEEDED, USE ANOTHER VICTIM PROPERTY LOSS REPORT FORM AND ATTACH PAGE TO PAGE 1. NUMBER EACH PAGE AND INDICATE TOTAL NUMBER OF PAGES. COMPLETE VICTIM IDENTIFICATION SECTION OF ALL PAGES.

NOTE: ANY PERSON WHO GIVES OR CAUSES TO BE GIVEN FALSE INFORMATION TO ANY LAW ENFORCEMENT OFFICER, WITH RESPECT TO THE COMMISSION OF ANY CRIME OR INCIDENT, IS GUILTY OF A FOURTH DEGREE CRIME UNDER THE NEW JERSEY CODE OF CRIMINAL JUSTICE (2C:28-4). FOURTH DEGREE CRIMES ARE PUNISHABLE BY A FINE OF NOT MORE THAN \$1,000.00, OR BY IMPRISONMENT FOR NOT MORE THAN 18 MONTHS, OR BOTH.

PROPERTY / VICTIM IDENTIFICATION SECTION							
DO NOT USE	ITEM NO.	MAKE	MODEL	OWNER APPLIED NUMBER	SERIAL NUMBER	DESCRIPTION	VALUE
I hereby report the above listed items as stolen from me on _____ Date		NAME OF VICTIM (PRINT)			SIGNATURE OF VICTIM		TOTAL
		ADDRESS OF VICTIM			TELEPHONE NUMBER (AREA)		PAGE NO. of PAGES