



SAULT STE MARIE POLICE SERVICE

ARREST REPORT

MISCELLANEOUS (SELECT UP TO 4):

<input type="checkbox"/> ACCOMPANIED BY VICIOUS DOG	<input type="checkbox"/> BLOCK PARENT	<input type="checkbox"/> HOLDER OF FAC/FPC
<input type="checkbox"/> LICENCED TO SELL	<input type="checkbox"/> MILITARY	<input type="checkbox"/> PERMIT TO CARRY
<input type="checkbox"/> PHYSICAL HANDICAP	<input type="checkbox"/> PREV RESIST ARREST	<input type="checkbox"/> RESTRICTED WEAPON
<input type="checkbox"/> VICTIM NOTIFICATION	<input type="checkbox"/> OTHER (CLARIFY)	

MARITAL STATUS:

<input type="checkbox"/> COMMON LAW MARRIED	<input type="checkbox"/> DIVORCED	<input type="checkbox"/> GROUP OR COMMUNE
<input type="checkbox"/> MARRIED	<input type="checkbox"/> SEPARATED	<input type="checkbox"/> SINGLE
<input type="checkbox"/> WIDOWED	<input type="checkbox"/> UNKNOWN	

DESCRIPTION:

HEIGHT:	WEIGHT:
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BUILD:

<input type="checkbox"/> THIN	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> HEAVY	<input type="checkbox"/> MUSCULAR	<input type="checkbox"/> ATHLETIC	<input type="checkbox"/> OBESE
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RACE:

<input type="checkbox"/> WHITE	<input type="checkbox"/> ABORIGINAL	<input type="checkbox"/> METIS	<input type="checkbox"/> BLACK
<input type="checkbox"/> HISPANIC	<input type="checkbox"/> ORIENTAL/ASIAN	<input type="checkbox"/> S. ASIAN/E. INDIAN	<input type="checkbox"/> MIDDLE EASTERN
<input type="checkbox"/> OTHER NON-WHITE			

COMPLEXION:

<input type="checkbox"/> DARK	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> LIGHT/FAIR
<input type="checkbox"/> RUDDY	<input type="checkbox"/> SALLOW	<input type="checkbox"/> ALBINO

FACIAL SKIN:

<input type="checkbox"/> PIMPLES/POCKMARKED	<input type="checkbox"/> FRECKLED	<input type="checkbox"/> MOLES
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HAIR:

COLOUR:	SECOND COLOUR:
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HAIR STYLE:

<input type="checkbox"/> AFRO	<input type="checkbox"/> BUSHY	<input type="checkbox"/> BRAIDED	<input type="checkbox"/> CURLY	<input type="checkbox"/> DREADLOCKS
<input type="checkbox"/> MOHAWK	<input type="checkbox"/> PONYTAIL	<input type="checkbox"/> PUNK	<input type="checkbox"/> RAT TAIL	<input type="checkbox"/> SPIKED
<input type="checkbox"/> STRAIGHT	<input type="checkbox"/> UNKEMPT	<input type="checkbox"/> WAVY		

HAIR LENGTH:

<input type="checkbox"/> SHORT	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> LONG	<input type="checkbox"/> BRUSH CUT	<input type="checkbox"/> SHAVED	<input type="checkbox"/> MIXED
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FACIAL HAIR:

COLOUR:

BEARD STYLE:

<input type="checkbox"/> NONE	<input type="checkbox"/> UNSHAVEN	<input type="checkbox"/> FULL	<input type="checkbox"/> PARTIAL	<input type="checkbox"/> SCRAGGLY	<input type="checkbox"/> GOATEE	<input type="checkbox"/> OTHER
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MOUSTACHE STYLE:

<input type="checkbox"/> NONE	<input type="checkbox"/> UNSHAVEN	<input type="checkbox"/> THIN	<input type="checkbox"/> MEDIUM	<input type="checkbox"/> THICK	<input type="checkbox"/> FUMANCHU
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EYES:

COLOUR:	LENSES:
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DENTAL CONDITION:

<input type="checkbox"/> BROKEN/MISSING UPPER	<input type="checkbox"/> FULL DENTURES UPPER	<input type="checkbox"/> STAINED
<input type="checkbox"/> BROKEN/MISSING LOWER	<input type="checkbox"/> FULL DENTURES LOWER	<input type="checkbox"/> CAPPED
<input type="checkbox"/> ALL MISSING UPPER	<input type="checkbox"/> UPPER PROTRUSION/OVERBITE	<input type="checkbox"/> STUD
<input type="checkbox"/> ALL MISSING LOWER	<input type="checkbox"/> LOWER PROTRUSION/OVERBITE	<input type="checkbox"/> BRACES
<input type="checkbox"/> PARTIAL DENTURES UPPER	<input type="checkbox"/> DECAYED	<input type="checkbox"/> GAP
<input type="checkbox"/> PARTIAL DENTURES LOWER	<input type="checkbox"/> CROOKED/IRREGULAR	<input type="checkbox"/> SILVER/GOLD

MARKS:

<input type="checkbox"/> PIERCED	<input type="checkbox"/> TATTOOS	<input type="checkbox"/> SCAR	<input type="checkbox"/> BURN SCAR
<input type="checkbox"/> BIRTHMARK	<input type="checkbox"/> WART	<input type="checkbox"/> MOLE	<input type="checkbox"/> AMPUTATION
<input type="checkbox"/> DEFORMITY	<input type="checkbox"/> OTHER (CLARIFY)		

ADDITIONAL MARKS (AS DESCRIBED ABOVE):

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ARREST DETAILS:

ARREST DATE:	TIME:	ARREST ADDRESS:
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TYPE OF ARREST:

<input type="checkbox"/> BENCH WARRANT	<input type="checkbox"/> FIRST INSTANCE WARRANT	<input type="checkbox"/> DISTRESS
<input type="checkbox"/> COMMITTAL WARRANT	<input type="checkbox"/> REASONABLE GOUNDS	<input type="checkbox"/> FAMILY COURT
<input type="checkbox"/> FOUND COMMITTING	<input type="checkbox"/> MENTAL HEALTH ACT	<input type="checkbox"/> OTHER (CLARIFY)