



SAULT STE. MARIE POLICE SERVICE POLICE OFFICER GUIDE

S/SGT. ☐
DUTY OFFICER ☐
CERB ☐
SHIFT CLERK ☐

<input type="checkbox"/> ADULT <input type="checkbox"/> YOUNG OFFENDER	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	CELL NO. <input type="checkbox"/> <input type="checkbox"/>
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ARRESTING OFFICER:	BADGE #:
OCCURRENCE ADDRESS:	

OCCURRENCE #:	CHARGE:	OCC DATE:
OCCURRENCE #:	CHARGE:	OCC DATE:
OCCURRENCE #:	CHARGE:	OCC DATE:
OCCURRENCE #:	CHARGE:	OCC DATE:
OCCURRENCE #:	CHARGE:	OCC DATE:

OCCURRENCE ADDRESS TYPE:		
<input type="checkbox"/> UNKNOWN <input type="checkbox"/> SINGLE HOME (YARD, DRIVEWAY) <input type="checkbox"/> PRIVATE PROPERTY STRUCTURE (E.G. DETACHED GARAGE, SHED) <input type="checkbox"/> APARTMENT <input type="checkbox"/> HOTEL <input type="checkbox"/> CAR DEALERSHIP <input type="checkbox"/> FINANCIAL INSTITUTION	<input type="checkbox"/> CONVENIENCE STORE <input type="checkbox"/> GAS STATION <input type="checkbox"/> SUPERVISED SCHOOL <input type="checkbox"/> UNSUPERVISED SCHOOL <input type="checkbox"/> COLLEGE <input type="checkbox"/> OTHER COMMERCIAL PLACE (E.G. OFFICE BLDG, STORE, BAR, RESTAURANT)	<input type="checkbox"/> OTHER NON-COMMERCIAL PLACE (E.G. COURTHOUSE, POLICE STN, CITY HALL, HOSPITAL, CHURCH) <input type="checkbox"/> PARKING LOTS <input type="checkbox"/> BUS OR BUS SHELTER <input type="checkbox"/> OTHER PUBLIC TRANSPORTATION <input type="checkbox"/> STREET OR HIGHWAY <input type="checkbox"/> OPEN AREAS

MOST SERIOUS WEAPON USED:		
<input type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> UNKNOWN <input type="checkbox"/> FULLY AUTOMATIC <input type="checkbox"/> SAWED-OFF RIFLE OR SHOTGUN <input type="checkbox"/> HANDGUN <input type="checkbox"/> RIFLE OR SHOTGUN	<input type="checkbox"/> OTHER FIREARM <input type="checkbox"/> KNIFE <input type="checkbox"/> OTHER PIERCING OR CUTTING <input type="checkbox"/> CLUB <input type="checkbox"/> EXPLOSIVES	<input type="checkbox"/> FIRE <input type="checkbox"/> PHYSICAL FORCE <input type="checkbox"/> OTHER WEAPON <input type="checkbox"/> THREAT <input type="checkbox"/> NO WEAPON

WEAPON STATUS:			
<input type="checkbox"/> NOT APPLICABLE	<input type="checkbox"/> UNKNOWN	<input type="checkbox"/> REAL	<input type="checkbox"/> FACSIMILE

NAME TYPE:				
<input type="checkbox"/> PRIMARY ALIAS	<input type="checkbox"/> NICKNAME MAIDEN NAME	<input type="checkbox"/> VARIANT OTHER	<input type="checkbox"/> ACRONYM LEGAL	<input type="checkbox"/> OPERATING

ACCUSED PERSON:			
SURNAME:	G1:	G2:	G3:
SEX:	DOB:	(OR AGE):	

NAME TYPE:				
<input type="checkbox"/> PRIMARY ALIAS	<input type="checkbox"/> NICKNAME MAIDEN NAME	<input type="checkbox"/> VARIANT OTHER	<input type="checkbox"/> ACRONYM LEGAL	<input type="checkbox"/> OPERATING
ALIAS:		NICKNAME:		