

<u>Alsip Police Department</u>

Citizen Crime Tip Form

Public Nuisances, Drug Activity, Gang Activity, Etc.

You <u>do not</u> have to give information about yourself, but do give as much information as you know about the suspected address and/or parties involved.			
This report should be returned to:	Alsip Police Departmen 4500 W. 123 rd St.	nt	
	Alsip Il. 60803	T . T M.11	
	via Fax: 708-385-7750 Attention Or jmiller@villageofals		
	or <u>jmiller @villageojuis</u>	<u>ip.org</u>	
1. Address of suspected activity:			
Inclu	de a description of the property (Color, locat	tion on block, single or two story residence	ce, apartment, apartment #, etc.
2. Names and descriptions of persons in	volved / or live on the property (Name, Nickname, Sex, Race, A	Age etc):
3. The suspected address is a: Ren	ttal Owner Occupied	Liquor Establishment	Business
Owner of the property:		Phone:	
4. Type of Activity: Drugs Gan	gs Public Nuisance (Loitering,	Etc.) Prostitution Stole	n Property Other
Describe in detail the activity, what kind of drugs, what	t suspected gang, if it's a public nuisance des	scribe specifically what the issues are.	
5. When is the biggest problem days and $6am - 9am$ $9am - 3pm$		Wed Thur Fri	Sat Sun
			11pm – 6am
Average number of visitors in a 3 hour p	period:Avera	ige length of their stay:	
6. Describe vehicles used by the occupation	nts of the problem area (Make, Moo	del, Year Color, and License Plate):	
7. Are there any children at the address?	Yes No if yes how	manywhat are their ag	ges
8. Are there any weapons at the address	? No Unknown	Guns Vicious Dogs	Other
Additional Information:			Describe
You do not have to include your name and allow us to contact you for additional info		do so you will add to the reliabi	ility of this report and
Date Received	VIA		
Alsin P.D. Case #	Officer Assigned		Date