

HOT SPOT CRIMINAL ACTIVITY REPORTING FORM

Directions: Print this form. Please fill out as much information as possible. Once completed, mail this form to us at:

Shively Police ATTN: Hot Spot Form 1800 Park Rd Shively, KY 40216

Or Fax us at 502-449-5042

Location of criminal activity _____

Type of criminal activity _____

Name of suspect(s) including aliases and nicknames _____

Physical appearance of suspect: Sex _____ Race _____ Age _____
Build _____ Weight _____ Height _____

Additional Information _____

Suspect vehicle: Plate _____ State _____ Vehicle Year _____
Make & Model _____ Color(s) _____

Weapons involved: No _____ Yes _____ If yes, describe _____

Drugs involved: No _____ Yes _____ If yes, describe _____

Any additional information _____

