HUNTSVILLE POLICE DEPARTMENT

Phone: 479-738-2610 | Fax: 479-738-2611

INCIDENT REPORT FORM

Please email form to police@huntsvillearkansas.org

NOTICE: ALL INFORMATION MUST BE FILLED IN AS ACCURATELY AS POSSIBLE

|  |  |
| --- | --- |
| **Date of Incident:** | Enter Date |
| **Time:** | Enter Time |
| **Location of Incident:** | Enter Location |

|  |  |  |
| --- | --- | --- |
| Enter Name | Enter Address | Enter Address |
| **COMPLAINTANT NAME** | **COMPLAINTANT ADDRESS** | **COMPLAINTANT PHONE #** |
| Enter Name | Enter Name | Enter Name |
| **WITNESS NAME** | **WITNESS ADDRESS** | **WITNESS PHONE #** |
| Enter Name |  Enter Address |  Enter Address |
| **SUSPECT NAME** | **SUSPECT ADDRESS** | **SUSPECT PHONE #** |

|  |
| --- |
| **NARRATIVE** |

|  |
| --- |
| Enter narrative here |

|  |  |
| --- | --- |
| **SIGNATURE:** Enter name here | **DATE:** Enter date here |