

HARRISBURG POLICE DEPARTMENT ABANDONED VEHICLE COMPLAINT

No. _____

COMPLAINANT'S REPORT

RECEIVED BY (ID#): _____

COMPLAINANT: _____

ADDRESS: _____ TELEPHONE #: _____

DATE REPORTED: _____ TIME REPORTED: _____

ADDRESS/LOCATION OF ABANDONED VEHICLE(S): _____

OFFICER'S INITIAL REPORT

DATE OFFICER RECEIVED REPORT: _____

ABANDONED VEHICLE(S) PRESENT:
YES _____ NO _____
(state how many)

COMMONLY KNOWN ADDRESS: _____

DESCRIPTION OF VEHICLE(S): VIN: _____ MAKE: _____
(continue on back if needed) MODEL: _____ YEAR: _____ COLOR: _____

OWNER'S NAME: _____

OWNER'S MAILING ADDRESS: _____

CITY/STATE/ZIP CODE: _____ TELEPHONE: _____

OWNER CONTACTED: YES _____ NO _____ DATE CONTACTED: _____

WILL OWNER REMOVE/REPAIR VEHICLE(S): YES _____ NO _____

DATE VEHICLE(S) ARE TO BE REMOVED/REPAIRED: _____ (NOTE: 30 days from contact)

OFFICER'S FOLLOW-UP REPORT

DATE: _____ TIME: _____

VEHICLE(S) REMOVED/REPAIRED:
YES _____ NO _____

WRITTEN NOTIFICATION

DATE OWNER NOTIFIED OF VIOLATION: _____

HOW OWNER NOTIFIED: PERSONAL SERVICE _____ CERTIFIED MAIL _____ PUBLISHED & POSTED _____

DATE VEHICLE(S) MUST BE REMOVED/REPAIRED: _____ (NOTE: 30 days from receipt of notice)

CORRECTED: YES _____ NO _____ DATE CORRECTED: _____

NOTE: COPIES OF ALL WRITTEN NOTICES AND COURT PAPERS MUST BE PLACED IN THE CASE FOLDER.

ABANVEHI.IPD