2-10 OFFENSE/INCIDENT REPORT FORM INSTRUCTIONS

2-10-1 PAGE 1

A. OFFENSE/INCIDENT REPORT

WRITING STYLE

For hand-written reports, the writer shall complete the report using legible, block print and black ballpoint pens. Only ballpoint pens are authorized.

CASE NUMBER

The case number is a twelve digit number. The first two digits represent the year, and the last ten digits represent the report number. If a case number is needed prior to the report being submitted to Records, the officer submitting the original report will call Report Review for a case number. The officer will write the case number on all pages of the report and any supporting documents prior to turning in the report.

OCCURRENCE DATE(S) AND TIME(S)

The writer will enter the date on which the event occurred by month/day/year, in two digit numerical sequences in the "on" block. If the event occurred over two or more days or the exact date is unknown, establish the earliest and latest dates and enter the earliest date in the "on" block and the latest dates in the "between" block.

The writer will enter the exact military time the event occurred in the "on" block. If the event occurred over a period of minutes, hours, etc., or the exact time is unknown, establish the earliest and latest time and enter the earliest time in the "on" block and latest time in the "between" block. If both the "on" and "between" dates of occurrence were entered, then the "on" and "between" times must correspond to the "on" and "between" dates.

DATE REPORTED AND TIME

The writer will record the date on which the report is written. The date is a two digit numerical sequence representing month/day/year.

The writer will record the military time at which the report is written.

DAY OF WEEK

The writer will enter the day of week the event occurred using the first two letters of the day (MO=Monday, TH=Thursday). If the exact day is unknown or the event covers more than 24 hours, enter X. If the event begins one day and ends the next, enter the beginning day.

AGENCY/COUNTY

For all non-preprinted APD reports, the writer will place an "X" in the APD box.
DISTRIBUTION NO.
The writer will enter the three digit APD beat code identifying the area where the event occurred for all reports where the event occurred in the jurisdiction of APD. If the reporting agency is APD, and the event occurred outside the jurisdiction of APD, enter "out".

INCIDENT NUMBER (CAD)
Officers dispatched to a call for which a report is generated will put the CAD event number in this box. In cases where multiple reports are generated, the CAD event number should be put on the primary report only. Subsequent reports will not require a CAD generated incident number. The report system will generate a unique incident number for each subsequent report.

BURGLARY, FORCE, NO FORCE, NUMBER OF UNITS (Required for residential and commercial burglaries only.)
Indicate whether forced or no forced entry was used to enter a residential or commercial structure. List the number of units entered, i.e., four storage units.

ADDRESS/LOCATION OF OCCURRENCE
The writer will enter the full and exact address of the event. If the event continues over some distance, enter address where the event began. If there is a chain of events, enter the address dispatched to and describe the relationship of addresses and events in the narrative. The address may include street numbers, street names, street types, building numbers, apartment numbers, quadrant of city, city, state, and zip code. If the event occurred in the City of Albuquerque, the writer may omit Albuquerque, NM. If the event occurred in an intersection, enter the numerical hundred block closest to the intersection and note the intersection in the narrative. DO NOT enter an intersection as an address. DO NOT give business names or institutions for location. If the event occurred in a vacant lot or mesa area, enter the nearest address and describe the location in the narrative. If the event occurred on the interstate indicate which one, direction of travel, and nearest mile marker (I25 NB at MM150). If the event occurred at the Big I, enter the interstate where the event occurred first, followed by the intersecting interstate, and direction of travel (I40 EB at I25, locates the event on I40 at I25 eastbound lane).
### STREET TYPES

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ST</td>
<td>Street</td>
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<tr>
<td>BLVD</td>
<td>Boulevard</td>
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<tr>
<td>RD</td>
<td>Road</td>
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<tr>
<td>CT</td>
<td>Court</td>
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<td>LN</td>
<td>Lane</td>
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<td>AV</td>
<td>Avenue</td>
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<td>DR</td>
<td>Drive</td>
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<td>PL</td>
<td>Place</td>
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<td>CR</td>
<td>Circle</td>
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<td>TR</td>
<td>Trail</td>
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<tr>
<td>LP</td>
<td>Loop</td>
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<tr>
<td>WY</td>
<td>Way</td>
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### QUADRANT

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<th>Description</th>
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<tbody>
<tr>
<td>NE</td>
<td>Northeast</td>
</tr>
<tr>
<td>SE</td>
<td>Southeast</td>
</tr>
<tr>
<td>NW</td>
<td>Northwest</td>
</tr>
<tr>
<td>SW</td>
<td>Southwest</td>
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</table>

### CITY

The writer will enter the city where the offense/incident occurred.

### ZIP CODE

The writer will enter the appropriate zip code for the location of occurrence.

### GANG RELATED

The writer will indicate by checking the appropriate "yes" or "no" box whether or not the offense/incident is gang related.

### HATE/BIAS MOTIVATION CODE

Required for hate crimes only. A hate crime offense/incident is an unlawful act, which after investigation by law enforcement, is or appears to be motivated primarily by race, ethnicity/national origin, religion, or sexual orientation of the victim or institutional target. Refer to your code guide for appropriate codes.

### OFFENSE

#### OFFENSE/INCIDENT

The writer will enter an accurate descriptive title for all reports. In felony or misdemeanor reports, the writer should utilize correct terminology from State Statutes or Local Ordinances. For example, Criminal Sexual Penetration, not RAPE; homicide, not MURDER. If the report covers several offenses, enter titles in order of seriousness with the most serious list first. Make sure that the report victim #1 matches offense #1, e.g., if a store is robbed and the clerk is murdered, the first listed offense is homicide and the victim is the clerk. Robbery is listed second and the store is listed as the #2 victim.
2-10-1 cont'd  

STATUTE OR ORDINANCE  
The writer will list the state statute or local ordinance that applies to each offense listed.

FELONY/MISDEMEANOR  
The writer will indicate whether the offense reported is a felony or a misdemeanor. Enter an "F" for felony or an "M" for misdemeanor in this box.

ATTEMPTED/COMPLETED  
The writer will indicate whether the offense reported was attempted or if the offense was completed; indicate this by marking the appropriate box.

UCR OFFENSE CODE (Records use)  
The writer will not write in this box, Records use only.

CRIMINAL ACTIVITY CODE  
The writer will report the appropriate code only for counterfeiting/forgery; stolen property offenses; drug/narcotic violations; drug equipment violations; gambling equipment violations; pornography/obscene material; and weapon law violations. Record up to three codes. Refer to your code guide for the appropriate codes.

Example:

The offenders published and sold pornographic photographs they took of children. Because up to three types of activity can be reported, "cultivating/manufacturing/publishing/producing", "distributing/selling", and "exploiting children", should be recorded.

LOCATION CODE  
The writer will enter the location code to indicate where each reported offense/incident occurred. Refer to your code guide for the appropriate codes.

WEAPON CODE (Required for below listed only)  
The writer will enter the appropriate weapon code (up to three) for each of the following offenses reported ONLY:

- Murder and Non-negligent Manslaughter
- Negligent Homicide
- Justifiable Homicide
- Kidnapping/Abduction
- Forcible Rape
- Forcible Sodomy
- Sexual Assault With An Object
- Forcible Fondling
- Robbery
- Aggravated Assault
- Simple Assault
- Extortion/Blackmail
- Weapon Law Violations
2-10-1 cont'd

Refer to your code guide for the appropriate codes. For example, an unknown type of firearm, enter "11", a pistol, enter "12".

OFFENDER(S) SUSPECTED OF USING
The writer will check the appropriate box to indicate whether alcohol, drugs, or computer equipment was associated with the reported offense(s). If unknown, check the UNK. box.

C. SUBJECTS (VICTIM/SUSPECTS/PERSONS/BUSINESSES)

PERSON CODE
The writer will enter the appropriate code that is listed to the upper right of the code box. The REPORTING PERSON code "R" is used only when the complainant is not the victim. If the REPORTING PERSON is also the victim, the "V" code is to be used.

TYPE CODE
The writer will enter the appropriate code that is listed to the upper right of the code box.

INJURY CODE
The writer will enter the appropriate code that is listed to the upper right of the code box.

NAME (LAST, FIRST, MIDDLE)
The writer will list the last name first of any person and complete name of business. Only one name is to be listed at a time, for example, you cannot list Mr. & Mrs. Thomas.

SOCIAL SECURITY NO.
Needed for creating persons jackets or tracking persons in the computer system.

DATE OF BIRTH (DOB)
Needed for creating persons jackets or tracking persons in the computer system.

AGE
Enter the age or approximate age of victim if known.

SEX
The writer will enter F(female), M(male), or X(unknown).

RACE
The writer will enter reporting persons Race.

WHT = White
2-10-1 C
cont’d

BLK = Black
ASIA = Asian, Pacific Islander
IND = American Indian, Eskimo, Aleut
UNK = Unknown Race

STREET ADDRESS
The writer will enter the address of the person or business.

RESIDENT PHONE
Indicate the exact home phone number of the person, if known. If person lives outside New Mexico, include an area code.

HEIGHT, WEIGHT, HAIR, EYES
MANDATORY for NCIC entries of all runaway and missing persons.

ETHNIC
The writer will mark only one box, e.g., Hisp=Hispanic, non=all non-Hispanics.

CITY, STATE, ZIP CODE
The writer will enter the city, state, and zip code of persons or businesses listed.

BUSINESS PHONE
Indicate the work phone number of the person or business. If the work number is outside of New Mexico, include an area code.

VICTIM OF OFFENSE NUMBER
The writer will indicate which offense number this person/institution was a victim of, i.e.; If John Doe was a victim to the first offense only, place a "1" in the box. If John Doe was victim to offenses 1 and 3, but not 2, place a "1" and "3" in the allocated space.

VICTIM OF SUSPECT NUMBER
The writer will indicate which offender/suspect John Doe was a victim of, i.e., John Doe was a victim of offender/suspect 1 and 2.

VICTIM TO OFFENDER RELATIONSHIP (REL.)
Refer to the code guide to describe the relationship of the victim to the offender. For example, if an employee assaulted his employer with his fists, the entry would be "ER".

NOTE **

THE VICTIM TO OFFENDER RELATIONSHIP IS REQUIRED ONLY IF THE VICTIM IS RELATED TO ONE OF THE FOLLOWING OFFENSES.
2-10-1 C
cont’d
Murder and Non-negligent Manslaughter

Negligent Homicide
Justifiable Homicide
Kidnapping/Abduction
Forcible Rape
Forcible Sodomy
Sexual Assault With An Object
Forcible Fondling Robbery
Aggravated Assault
Simple Assault
Intimidation
Incest
Statutory Rape

OCCUPATION/EMPLOYER/SCHOOL AND ADDRESS
Enter this information if known.

SUSPECT OF OFFENSE NUMBER
Required when multiple offenses are listed. The writer will use this box when multiple suspects are listed for multiple offenses reported. Indicate what offense(s) each suspect is suspected of.

ARRESTED FOR OFFENSE NUMBER
Required when multiple offenses are listed. The writer will use this box when multiple arrested persons are listed for multiple offenses reported. Indicate what offense(s) each arrested person was arrested for.

GANG AFFILIATION
The writer will enter the gang affiliation for persons listed if this information is known, i.e., Crips, Bloods.

ALIAS/NICKNAME
The writer will list all known alias and or nicknames, to include DOB’s and SSN’s of persons listed.

MARKS, SCARS, TATTOOS, AND/OR CLOTHING DESCRIP.
The writer will enter all that applies if the information is known. THIS INFORMATION IS IMPORTANT FOR ALL RUNAWAY AND MISSING PERSON REPORTS.

DRIVER’S LICENSE NUMBER/D.L. STATE
The writer will enter the driver’s license number and issuing state for persons listed if this information is known.
2-10-1 C.

cont'd

ARREST/CITATION NUMBER
The writer will enter the arrest and/or citation number for arrested and/or cited persons.

F.B.I. NUMBER, S.I.D. NUMBER
The writer will enter these numbers if known.

* NCIC NUMBER
The writer will write this number in only if a runaway/missing person has been recovered and this number is known.

RESIDENT STATUS
If a person is a resident of the City of Albuquerque, mark RES. If the person is a resident outside of the City of Albuquerque or is a transient, mark NON.

D. VEHICLE

VEHICLE STATUS CODE
The writer will enter the appropriate vehicle status code listed to the right of the code box.

VEHICLE TYPE CODE
The writer will enter the appropriate vehicle type code listed to the right of the code box.

YEAR
The writer will enter the year the vehicle was manufactured.

MAKE AND MODEL
The writer will provide as accurate description as possible, i.e., Chevrolet Corvette, Toyota 4Runner.

BODY STYLE
The writer will indicate body style of vehicle, e.g., van, 2-door, hardtop.

LICENSE NUMBER AND LICENSE YEAR
The writer will enter the vehicle's license plate number and year of registration.

LICENSE STATE
The writer will enter the abbreviation of the state in which the vehicle is licensed.
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<tr>
<th>2-10-1 D</th>
<th>TOP COLOR/BOTTOM COLOR</th>
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<td>cont'd</td>
<td>If vehicle is one color, list that color in the TOP COLOR box.</td>
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</table>

**VALUE/DAMAGE ESTIMATION**
The writer will list the approximate value of the vehicle that has been damaged, stolen, or recovered.

**REGISTERED OWNERS NAME**
The writer will list the registered owner's name if other than subjects already listed in the persons section. If the registered owner has already been listed in the persons section, list the subject number in this box rather than duplicating information.

**VEHICLE IDENTIFICATION NUMBER (VIN)**
The writer will enter the complete vehicle identification number, this is MANDATORY FOR ENTRY INTO THE NCIC FOR ALL STOLEN AND EMBEZZLED VEHICLES.

**DISTINGUISHING FEATURES/VISIBLE DAMAGE**
The writer will enter any unique features noted on the vehicle, e.g., bumper stickers, broken window.

**ADDRESS**
The writer will list the address of the registered owner if other than subjects already listed in the persons section. If the registered owner has already been listed in the persons section, list the subject number in this box rather than duplicating information.

**TOW TO/BY**
The writer will list the name of the Towing Company as well as the address to which the vehicle is to be stored. If the owner takes possession of the vehicle, the writer will indicate owner/owner destination in this box. This box is MANDATORY VEHICLE RECOVERY INFORMATION.

**NCIC NUMBER**
Enter this number when recovering vehicles that are listed in the NCIC.

**TOWED FROM, OWNER NOTIFIED**
The writer will list the location the vehicle was towed from. The writer will indicate that the owner was notified by checking this box.

**DATE RECOVERED, TIME RECOVERED**
The writer will enter the date, month/day/year and military time of all recovered stolen/embezzled vehicles. MANDATORY VEHICLE RECOVERY INFORMATION.
A. PROPERTY

PROPERTY STATUS

The writer will enter the appropriate code from the PROPERTY STATUS SECTION located at the top of this report form, e.g., If the item is stolen, put a "1", if the item is stolen/recovered, put a "2".

PROPERTY TYPE

The writer will enter the appropriate code from the PROPERTY TYPE SECTION located at the top of this report form, e.g., If the item is a firearm, put a "13", if the item is money, put a "20". Consumable goods are such things as make-up, gasoline, food, hygiene products and cigarettes.

TYPE OF ITEM

The writer will list specifically the item, e.g., bicycle, wrench, pistol, toaster.

MAKE/BRAND

The writer will enter the common property description, e.g., Schwinn, Smith & Wesson.

MODEL

The writer will enter the model of property listed.

CALIBER

The writer will enter the caliber of all firearms listed.

VALUE (except narcotics)

The writer will enter an approximate or actual value of loss, recovered, burned, stolen, seized, etc., property.

SUSPECTED DRUG TYPE

The writer will enter the suspected drug type, i.e., Marijuana would be entered as an "E".

QUANTITY/UNIT OF MEASURE

The writer will enter the appropriate information describing the whole quantity for each type of drugs/narcotics, also for property.

DESCRIPTION (COLOR, SIZE, FEATURES, ETC.)

The writer will enter the complete description of property, including size, color, dimensions, etc.
SERIAL/OAN

In order for property to be entered into the NCIC, all identifying numbers MUST be included.

DATE RECOVERED
The writer will indicate the date property was recovered by month/day/year.

* NCIC NUMBER
Enter this number if the NCIC number is known for recovered property.

M.O. EVENT CODES (agency optional use)
The writer will enter all applicable codes utilizing the code guide.

TOTAL VALUE STOLEN/TOTAL VALUE RECOVERED
The writer will calculate the total value stolen and enter the amount. The writer will calculate the total value recovered and enter the amount.

B. SYNOPSIS

SYNOPSIS

The writer will enter a synopsis for ALL offense/incident reports except a confidential narcotic report.

C. NARRATIVE

NARRATIVE

The writer will list all pertinent information necessary in regard to the specific offense/incident the writer is reporting. The writer's handwriting will be clear, concise and free of grammatical errors. UNDER NO CIRCUMSTANCE IS THE WRITER TO USE FELT TIP OR BLUE INKED PENS WHEN FILLING OUT THE OFFENSE/INCIDENT REPORTS. The narrative can be left blank if it is a confidential narcotic report.

D. CERTIFICATION/STATUS INFORMATION

INTENT TO PROSECUTE
The writer will instruct the victim to mark either the "yes" or "no" box. Please note that the "yes" box will need to be marked by the victim when reporting an auto theft or an embezzled vehicle.
COMPLAINANT/VICTIM CERT. SIGNATURE/DATE

The writer will instruct the complainant/victim that by signing this box, all information given to police is true and correct. The complainant/victim will enter the date the report is signed. Box 19 is MANDATORY for embezzled vehicle reports.

REPORTING OFFICER, RANK, ID NO.
The writer will print name, (last name first) rank, and I.D. number.

DATE
The writer will enter date report has been completed.

DET./FOLLOW-UP OFFICER/REFERRED TO
Enter detectives, officers, or other units that the report is to be referred.

I.D. NUMBER
Enter the I.D. number of the detective the offense/incident is to be referred, if known.

DATE
Enter the date writer refers report for follow-up.

ASSISTING OFFICER, RANK, ID NUMBER, DATE
The writer will enter the name, (last name first) rank, and ID number of the assisting officer as well as the date report was completed.

PROCESSED BY/DATE (Records use)
This box is reserved for the Report Review Unit.

DATA ENTRY PERSON/DATE (Records use)
This box is reserved for the Data Entry Unit.

APPROVING OFFICER, RANK, ID NUMBER
The approving officer will, after reviewing the report, print name, (last name first) rank, and ID number.

DATE
The approving officer will enter the date report was reviewed and signed by him/her.

INCIDENT STATUS
The writer will enter the internal status of the offense/incident reported; ACTIVE, INACTIVE, CLOSED, UNFOUNDED, CLEARED BY ARREST OR CLEARED EXCEPTIONALLY:

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cont'd | ACT | Active, the case is still under investigation and has not been cleared or suspended.
---|---|---
    | INA | Inactive, the case has not been cleared, but is not considered under active investigation.
    | CLOSED | Closed, the case has been closed, no further investigation will take place and the case is considered completed.
    | UF | Unfounded, the reported offense(s) have been determined to be unfounded.
    | CLA | The offense(s) have been cleared by the arrest of the offender(s) or citation(s) have been issued.
    | CLE | Cleared exceptionally. Is the suspect(s) name, address and DOB, or SSN listed? If so than this box will be marked. ALL domestic violence/disturbance reports regardless of how much information is known of the suspect(s) will be cleared exceptionally, unless an arrest has been made. An exceptional clearance will also apply to the following circumstances:
1. The investigation must have clearly and definitely established the identity of at least one offender.
2. Sufficient probable cause must have been developed to support the arrest, charging, and prosecution of the offender.
3. The exact location of the offender must be known so that an arrest could be made.
4. There must be a reason outside the control of law enforcement that prevents the arrest.

EXCEPT. CODE
The writer will enter the appropriate code for all exceptionally cleared offense/incident reports:

A-Death of Offender

The case was cleared due to the death of the offender. The death of the offender could have occurred from any means, related or not to the case.

B-Prosecution Declined

Either the victim or prosecuting attorney declined (or refused) to prosecute the case. Not applicable for domestic cases.
cont'd

C-Extradition Denied

Either the distinct attorney's office declined to extradite the offender or the jurisdiction holding the offender refused to grant extradition.

D-Victim Refuses to Cooperate

Victim refused to cooperate in either the investigation or prosecution of the case. Not applicable for domestic cases.

E-Juvenile, No Custody

The suspect(s) are juveniles(s) and have been identified but no arrest or citation was enforced.

N-Not Applicable

The suspect(s) have been identified but the cleared exceptional codes listed do not apply.