Connecticut Intelligence Center
CTIC

Priority	Incident Type
Routine	

Print Form | Submit by Email

Instructions: You may use Adobe Acrobat to fill, save, email and print this form. Use the mouse to insert the cursor in a field or click check boxes. When completed, move cursor on the **Submit by Email (click)** and follow the instruction. **For reported Incident requiring Immediate/Priority response - Call (860) 706-5500**, then complete this form.

This report may be used to submit Suspicious Activity, 911 call and HLS Tips to the Connecticut Intelligence Center. Members should use this report to supplement, but not supercede, any incident or offense report procedures in use by your department. No portion of this document will be released without the submitting agency's express consent.

PERSON TAKING / REPORTING INCIDENT

NAME (Last, First Middle)	TITLE/RANK	AGENCY/DEPT	TELEPHONE NO.

DATE OF INCIDENT	DAY OF WEEK	TIME	LOCATION OF INCIDENT	CITY	STATE	ZIP CODE

SUSPICIOUS ACTIVITY REPORTING ☐ Criminal ☐ Suspicious

If applicable describe activity: (Check all applicable)

Briefly Describe Activity:

SUBJECT DESCRIPTION (IF KNOWN)

SUBJECT 'S NAME (Last, First Middle) ☐ Unknown	ADDRESS ☐ Unknown	CITY	STATE

DATE OF BIRTH	SEX	SSN	TELEPHONE NO.	IDENTIFICATION TYPE	IDENTIFICATION NUMBER

AGE	BUILD	HEIGHT	WEIGHT	HAIR	EYES	RACE	CONDITION OF SUBJECT (Check if applicable)
		ft in					☐ ASSAULT ☐ WEAPONS ☐ ALCOHOL ☐ DRUGS ☐ OTHER

FIELD INTERVIEW CONDUCTED ☐ YES ☐ NO

If Yes: Please provide a copy of statement

DISTINGUISHING FEATURES/MULTIPLE SUBJECTS

POSSIBLE AKA INFORMATION

AKA NAME

AKA DOB

AKA SSN

VEHICLE DESCRIPTION (IF KNOWN/APPLICABLE)

YEAR	MAKE	MODEL	VEH TYPE	COLOR	REGISTRATION	STATE	VEHICLE IDENTIFICATION NUMBER (VIN)

VEHICLE TYPE: ☐ Passenger ☐ Commerical ☐ Motorcycle ☐ Boat

SOURCE/COMPLAINANT INFORMATION

If Source: (Check all applicable) **CREDIBLE** ☐ YES ☐ NO **(Explain Your Reason in The Narrative)** ☐ Source Available to be interviewed

SOURCE 'S NAME (Last, First Middle)	ADDRESS	CITY	STATE

DATE OF BIRTH	SEX	RACE	SSN	TELEPHONE WORK	HOME	CELL

RELATED REPORTS

Reporting Department	Reporting Incident

NAME OF REPORT AGENCY

CTIC ONLY: REPORT PROVIDED TO

☐ FBI - SQUAD ☐ JTTF ☐ US COAST GUARD ☐ OTHER

☐ CSP ☐ RILO

CONNECTICUT INTELLIGENCE CENTER TRACKING #

CTIC - SAR 8/2010

Connecticut Suspicious Activity Report
For reported Incident requiring Immediate/ Priority response - Call (860) 706-5500

Case/Incident #

CONNECTICUT INTELLIGENCE CENTER TRACKING #

SUMMARY OF REPORTED INCIDENT

Provide Summary in the Space Below (or Attach Related Report(s))

Current Date

Connecticut Intelligence Center * 25 Sigourney St 6th Floor,* Harford * CT *06106 Phone: 860-706-5500 Fax: 860-706-5535 * Group Email ctic@ct.gov