

EXHIBIT F



TRESPASS CRIMES – FACT SHEET
 PD 351-144 (Rev. 01-15) — DRAFT

Complete all Captions on BOTH Sides of This Form

Defendant's Name		Arrest No.	
Date of Arrest	Time of Arrest	Location	
Arresting Officer's Name		Shield No.	Tax No.
Observing Officer's Name		Shield No.	Tax No.

1. Were there "No Trespassing" and/or "Tenants and Guests Only" signs conspicuously posted at the location? Yes
 No

IF YES, Where? _____

For NYCHA arrests ONLY: If the defendant was arrested for presence in a restricted area, were there conspicuously posted signs at the location that prohibit entry in that specific restricted area? Yes No

IF YES, where were those signs? _____

2. Was defendant seen entering the location? Yes No

IF YES, how did the defendant gain access to the building? _____

3. How long did you observe the defendant in the building before you approached? _____

4. Where was the defendant when he was stopped? _____

5. Describe the factors that led to the decision to approach and question the defendant:

6. Did you approach the defendant and ask:

a) Do you live in the building? Yes No If Yes, (response) _____

b) Are you visiting someone in the building? Yes No If Yes, (response) _____

c) Do you have business in the building? Yes No If Yes, (response) _____

OVER

7. How was it determined that the defendant was not a tenant, guest or on business in the building, prior to arrest?

a) Did defendant provide an apartment number? Yes No IF YES, Apt No. _____

b) Did defendant provide a name of an alleged tenant he/she was visiting? Yes No

Name Provided _____

c) Did you go to apartment defendant indicated? Yes No

8. Did defendant make any statements? Yes No IF YES, defendant stated in sum and substance:

Statement made to _____ Shield No. _____ Tax No. _____

at approximately _____ (time) at _____ (location)

on _____ (date)

9. Was evidence recovered from the defendant? Yes No

a) IF YES, describe the evidence and EXACTLY where the evidence was recovered from _____

b) Did you recover the evidence? Yes No

IF NO, did you observe the recovery of the evidence? Yes No

c) Indicate officer who recovered evidence:

Rank/Name _____ Shield No. _____ Tax No. _____

Reporting Officer's Signature

Date
