

KING COUNTY DEPARTMENT OF PUBLIC SAFETY ITA ORDER OF APPREHENSION INFORMATION SHEET

IS THIS SUBJECT ARMED? Y N TYPE OF WEAPON:

DANGEROUS? Y N STATE HOW: MENTAL

NAME (LAST, FIRST MIDDLE)						SEX	RACE	DOB		
POB	HGT	WGT	EYE	HAIR	SKIN	FBI#			AFIS/SID/MNU#	
SCARS, MARKS, TATOOS						SOC-SEC #			FINGERPRINT CLASS/FPC	
DRIVER'S LIC#				STATE	EXPIRES	ALIAS				
ADDRESS (LKA)								EMPLOYER/PHONE		
LIC PLATE		LIC ST	TAB YR	LIC TYPE	VIN	VEH YR	MAKE	MODEL/STYLE	COLOR	
<i>FOR DATA USE ONLY</i>										
<input type="checkbox"/> FELONY <input type="checkbox"/> MISD		DOW	WARRANT#			OFF/OFFENSE ORIG CHG ESCAPE				
BAIL -0-		COURT (ORC) SUPERIOR			FTA (CIRCLE ONE) Escape from Locked Psychiatric Facility					
ISS AGENCY Prosecuting Attorney		CASE #								
DEPT/DET HANDLING - PHONE #				MATERIAL WITNESS WANT EXPIRES						
			EXTRADITION INFORMATION							
WACIC <input type="checkbox"/> KING COUNTY ONLY <input type="checkbox"/> STATEWIDE			NCIC <input type="checkbox"/> EXTRADITE FROM: IDAHO & OREGON ONLY <input type="checkbox"/> EXTRADITE FROM: OR, ID, MT, WY, CA, NV, UT, CO, AZ, NM, HI & AK ONLY <input type="checkbox"/> EXTRADITE FROM ALL 50 STATES							
NCIC ENTRY APPROVED BY: <div style="text-align: center;"> _____ Chief P.A. or Designee </div>										
			DATA ENTRY USE							
ENTRY INFO						CLEARANCE INFO				
CCN # _____			DOE _____			DOC _____				
WAC # _____			TOE _____			TOC _____				
NIC # _____			OP# _____			OP# _____				