QUINAULT INDIAN NATION POLICE DEPARTMENT STOLEN VEHICLE REPORT FORM

Incident Number:	License Plate :
Date and Time:	
Officer:	License State:
Vehicle Only Recovery Only Impound Waiver	Approximate Value of Vehicle
☐ Theft with Recovery ☐ Theft of License Plate Only	
Date/Time of the Theft/Recovery/Impound	Day of the Week
Address of the Theft:	
Check one: ☐Garage ☐Carport ☐Driveway ☐Street	
Person filing report physical and mailing address:	Telephone Number:
Registered Owners Physical and Mailing address:	Telephone Number:
Owner Notified by:	
Legal Owner or Lien Holder:	
Address of Legal/Lien:	
Insurance Company: Telephone Number:	
Address of Insurance:	26.11
Vehicle Description: Year Make	Model Doors
Color / Vin Number:	
Identifying Characteristics: (Damages/special equipment/modifications or other noticeable features)	
Describe:	
Is there a current Divorce or Separation in Progress	s? Are Payments Due
Were the doors Locked?: Keys in the ignition	on? Ignition Locked
The undersigned, herby declare this to be a true and correct repor	t: I did not give anyone permission to take or use
the described vehicle. I am the owner or person who was legally in possession of the described vehicle: and I will	
testify in the Quinault Tribal Court, under oath, to the fats herein. I understand that I may be charged pursuant to	
violation of Quinault Tribal Code 12.08.160, obstructing a Public Servant, by filing a false report. If I regain	
possession of this vehicle, I understand that I must notify the Quinault Indian Nation Police Department	
immediately of the recovery; I also understand that I may be held liable for any expenses resulting from my failure	
to notify the police department.	
Date/Time: Signature of Repo	orting Party:
Witness Signature: Reporting Party P	Printed Name:
Withess dignature.	
Condition of Recovery:	
Stripped of: License Plate Vin Plate Transmission Engine Other	
How the vehicle was started: □Ingition Unlocked□Key in Ingition □Ground Wires □Foil	
□Coil Jumper □Coasted to start □Other:	