

New York State Standardized DOMESTIC INCIDENT REPORT (DIR) (Form 3221-05/2011)

REMEMBER: Whenever possible, ask complainant the DIR questions OUT of earshot and eyesight of suspect

RECENT CHANGES TO STATE LAW:

Effective 12/15/2009: Where the reported incident involved an offense committed by an individual known by the law enforcement officer to be under probation or parole supervision, he or she shall transmit a copy of the report as soon as practicable to the supervising probation department or the Division of Parole. (CPL§ 140.10[5])

Effective 11/11/2010: Three offenses have been added to Penal Law Article 121 entitled Strangulation and Related Offenses, designated as family offenses pursuant to: Criminal Obstruction of Breathing or Blood Circulation (PL§ 121.11; A Misdemeanor), Strangulation 1st (PL§ 121.13; C Felony), and Strangulation 2nd (PL§ 121.12; D Felony).

WHERE TO SEND DIR FORMS

New York City (NYC) DIR forms are sent to NYPD and do not need to be sent directly to DCJS.

State Police forward DCJS copies of DIR to **Zone Headquarters**.

All Other Agencies, send DCJS copies of DIR to:
NYS Division of Criminal Justice Services
NYS Identification Bureau-DIR Unit-5th Floor
80 South Swan Street
Albany, New York 12210

If Suspect is on Probation or Parole Supervision, photocopy the **police copy** of DIR and send to the County Probation Department or the local Parole Office.

Addresses for County Probation Departments and Parole Offices can be found in the Criminal Justice Directory at: **<http://criminaljustice.ny.gov>**

HOW TO REQUEST MORE DIR FORMS

To order additional forms send an email to:

dcjs.dl.dirform@dcjs.ny.gov

When ordering forms, please provide the **agency name** and **street address** for shipment, no P.O. Boxes accepted. DIR forms come 25 forms to a pad. Please base your order on the **number of pads** needed, not the number of forms.

IMPORTANT HOTLINE NUMBERS

Child Protective Services (Public) 1-800-342-3720
CPS (Mandated Reporter) 1-800-635-1522
NYS Domestic Violence (English) 1-800-942-6906
NYS Domestic Violence (Spanish) 1-800-942-6908
Adult Protective Services 1-800-342-3009 (Option 6)

$$\left. \begin{array}{l} \text{---} \\ \text{---} \\ \text{---} \end{array} \right\}$$

Quick Reference Guide

(PRIOR DV HISTORY?) “Has _____ ever hurt you, threatened harm to you or others, made you afraid, or forced you to do something that you didn’t want to do (prior to this incident)?”

(VICTIM FEARFUL?) “Are you currently concerned or in fear for your safety or the safety of someone else because of _____’s behavior?” (**Note:** Document specific fear and reasons for it. Fear may be an element of an offense (e.g. menacing, coercion, stalking, etc.). Also, document in statement of allegations.

INFORM VICTIM. "A victim advocate can help you with SAFETY PLANNING, an important issue to be discussed with a local service provider. On the back of a form that I will give you are some phone numbers that can assist you. Do you need assistance with making arrangements for transportation to another location?" (Note: CPL 530.11(6) requires a police officer to advise a victim of local available services.)

Officers are NOT required to arrest each person in dual complaint situations.

Below is a list of some frequently seen offenses in domestic violence incidents.

REMEMBER to CHARGE all relevant offenses and charge at the highest degree appropriate for the circumstances.

Family Offenses

(refer to CPL articles 140 and 530.11)

Aggravated Harassment 2nd (240.30; A Misd)
Assault 2nd (120.05; D Felony)
Assault 3rd (120.00; A Misdemeanor)
Attempted Assault (110.00)

Criminal Mischief 1st (145.12, B Felony)
Criminal Mischief 2nd (145.10, D Felony)
Criminal Mischief 3rd (145.05, E Felony)
Criminal Mischief 4th (145.00, A Misd)
Criminal Obstruction of Breathing or Blood Circulation (121.11, A Misd)

Disorderly Conduct (240.20; Violation)
Forcible Touching (130.52; A Misd)

Harassment 1st (240.25; B Misd)
Harassment 2nd (240.26; Violation)

Menacing 2nd (120.14; A Misdemeanor)
Menacing 3rd (120.15; B Misdemeanor)

Reckless Endangerment 1st (120.25; D Felony)
Reckless Endangerment 2nd (120.20; A Misd)

Sexual Abuse 2nd (130.60(1); A Misd)
Sexual Abuse 3rd (130.55; B Misd)

Stralking 1st (120.60; D Felony)
Stralking 2nd (120.55; E Felony)
Stralking 3rd (120.50; A Misd)
Stralking 4th (120.45; B Misd)
Strangulation 1st (121.13; C Felony)
Strangulation 2nd (121.12; D Felony)

Agg. Assault Person under 11 (120.12; E Fel)
Agg. Criminal Contempt (215.52; D Felony)
Agg. Harassment 1st (240.31; E Felony)
Aggravated Cruelty to Animals (NY Agr & M)

Section 353-a, Felony)
Assault 1st (120.10; B Felony)
Burglary 1st (140.30; B Felony)
“ 2nd (140.25; C Felony)
“ 3rd (140.20; D Felony)
Robbery 1st (160.15; B Felony)
“ 2nd (160.10; C Felony)
Coercion 1st (135.65; D Felony)
“ 2nd (135.60; A Misd)

Case	Year	Category	Outcome
Criminal Contempt I st	(215.51; E Felony)	2 nd	(215.50; A Misd)
Criminal Trespass	1 st	(140.17; D Felony)	2 nd
		(140.15; A Misd)	3 rd
Endangering Welfare of Child	(260.10; A Misd)		
Endang. Welf. of Vulnerable Elderly Person	1 st		
			(260.34; D Felony)

(215.17; B Felony)
Intimidating Victim or Witness 2nd
(215.16; D Felony)
Intimidating Victim or Witness 3rd
(215.15; E Felony)

Menacing 1st (120.13; E Felony)
Manslaughter 1st (125.20; B Felony)
Manslaughter 2nd (125.15; C Felony)
Murder 1st (125.27; A-I Felony)
Murder 2nd (125.25; A-I Felony)
Resisting Arrest (205.30; A Misd)
Unlawful Imprisonment 1st (135.10; E Felony)
2nd (135.05; A Misd)

Offense	1 st	2 nd	3 rd	4 th
Reckless Endanger. of Property	1 st (130.65; D Felony)			
Sexual Abuse	1 st (145.25; B Misd)			
Tampering with a Witness	1 st (215.13; B Fel)	2 nd (215.12; D Fel)	3 rd (215.11; E Fel)	4 th (215.10; A Misd)
Unauth. Use of a Vehicle	1 st (165.08; D Fel)	2 nd (165.06; E Fel)	3 rd (165.05; A Misd)	

Rape 1st (130.35; B Felony)

Kidnapping 1st (135.25; A-I Felony)
2nd (135.20; B Felony)

Endang. Welf. Vulner. Elderly 2nd (260.32; E Fel)
Facil. a Sex Off. W. a Cont. Sub. (130.90; D Fel)

2nd (265.08; A Misd)
Criminally Negligent Homicide (125.10; E Fel)

“ 3rd (145.14; B Misd.)
Criminal Use of a Firearm 1st (265.09; B Fel)

Criminal Tampering 1st (145.20; D Felony)
 “ 2nd (145.15; A Misd.)

2nd (130.45; D Felony) “
3rd (130.40; E Felony) “

“ 4th (265.01; A Misd) Criminal Sexual Act 1st (130.50; B Felony)

2nd (265.03; C FeI)
3rd (265.02; D FeI)

1st (265.04; B Felony) Criminal Possession of a Weapon

Computer Trespass (156.10; E Felony)
Criminal Possession of a Dangerous Weapon

3 rd (156.25; E Felony)	“
4 th (156.20; A Misd.)	“

Computer Tampering 1st (156.27; C Felony)
2nd (156.26; D Felony)

3rd (130.66; D Felony) “
4th (130.65-a; E Felony) “

Agg. Sexual Abuse 1st (130.70; B Felony)
2nd (130.67; C Felony)

Often Committed Offenses

Other Possible Offenses

Agency				ORI		NEW YORK STATE DOMESTIC INCIDENT REPORT			Sprint # (NYC)		Incident #		
DATES	Report	Month	Day	Year	Time (24 hrs)	Address of Occurrence			APT #	Precinct (NYC)/CTV	Aided # (NYC)	Complaint #	
	Occured					How can we safely contact you? (e.g. Name, Phone)				Officer-Initiated Radio Run Walk-In			
VICTIM/PARTY1 (P1)	Name (Last, First, M.I.) / (include aliases)					Phone		DOB	Month	Day	Year	Age	Male Female
	Street & City					APT #	Zip		If non-English, language: Spanish Chinese Other: _____				
VICTIM/PARTY2 (P2)	Name (Last, First, M.I.) / (include aliases)					Phone		DOB	Month	Day	Year	Age	Male Female
	Street & City					APT #	Zip		If non-English, language: Spanish Chinese Other: _____				
SUSPECT / PARTY2 (P2)	Injured? No Yes					Removed to Hospital? No Yes If yes, what hospital? _____		White Black Asian American Indian Other: _____		Hispanic Non-Hispanic Unknown		Notes (e.g. special needs, disability, requests):	
	Describe: _____												
	SUSPECT/P2 present? Yes No	LIVING SITUATION					RELATIONSHIP: (SUSPECT / P2 to VICTIM / P1)					Prior DV History? Yes No	
		Do parties currently live together? Yes No IF NO, have they lived together in the past? Yes No Do the parties have a child-in-common? Yes No					Married Formerly Married Intimate Partner/Dating Former Intimate/Dating Child of victim/party 1 Parent of victim/party 1 Relative: _____ Other: _____					Prior DV police report? Yes No Victim fearful? Yes No Suspect: Access to weapons? Yes No Drug/Alcohol history? Yes No Suicide threat history? Yes No	
ASSOCIATED PERSONS	1. Name (Street / APT# / City, if needed)					Phone		DOB	Month	Day	Year	Relationship to victim / P1	
	2.												
	3.												
SUSPECT ACTIONS	(Check all that apply)					Impaired Alcohol/Drugs Pushing Threw Items Threats: (specify) Injure/Kill Persons Injure/Kill Self Injure/Kill Pet/Animal Take Child Destroy/Take Property Other: _____		Threat with weapon Weapons used: (specify) Blunt Object Gun Motor Vehicle Sharp Instrument Other: _____					
	Biting Destroyed Property (Estimated \$ _____) Forced Entry Forcible Restraint Hair Pulling Homicide Intimidation/Coercion Interference with Phone Injury to Child Injury to Other Persons Injury to Pet/Animal Intimidation/Coercion Kicking Punching Sexual Assault Shooting Slapping Slamming Body Stabbing Strangulation/"Choking" Suicide or Attempt					Unwanted Contact Verbal Abuse Violated Visitation/Custody Conditions OTHER Suspect Actions: _____							
ARREST	Arrest Made? Yes No		Arrest #		Reasons arrest not made on-scene: No Offense Committed No Probable Cause Suspect Off-Scene Warrant/Criminal Summons to be requested Violation level: not in police presence (no citizen's arrest) Other: _____								
OFFENSES & OP	Offenses		Law (e.g. PL)		Section (Sub)		Charges Filed		Offenses Involved: (check all that apply) Felony Misdemeanor Violation Other (Specify) _____				
	1.								Registry Checked? Yes No OP Court Name: _____				
	2.								Order of Protection? Yes No Family Criminal Supreme Stay Away Order? Yes No Out of State Tribal				
INVESTIGATION	3.								Order Violated? Yes No Expiration Date Month Day Year Any PRIOR orders? Yes No				
	STOP! > ***** COMPLETE STATEMENT ON PAGE 2 NEXT ***** >												
	Photos Taken? Yes No		IF YES, photos taken of: Victim Injuries Suspect Injuries Scene Damaged Property Other: _____					Other evidence collected? Yes No IF YES, describe: _____					
	Results of investigation and basis of action taken. (Were excited utterances, spontaneous admissions or spontaneous statements made?) Yes No (Complete 710.30 or other form when applicable). _____												

	Any Guns in House? Yes No Any Guns Seized? Yes No Household Member Has Pistol Permit? Yes No Permit Seized? Yes No												
	Permit #(s): _____ Issuing County: _____ Name on Permit(s): _____												
Is there reasonable cause to suspect a child may be the victim of abuse, neglect, maltreatment, or endangerment? Yes No IF YES, officer must contact the NYS CHILD ABUSE HOTLINE REGISTRY # 1-800-635-1522													
IS SUSPECT ON PAROLE OR PROBATION? Probation Parole Not Supervised Status Unknown						CONTACTS INITIATED BY POLICE: Domestic Violence Services Child Protective Services (or ACS) Other Agency: _____							
Officer's Signature (& Rank)				(PRINT and SIGN)		I.D.		Month		Day	Year	1. Was DIR given to the victim at the scene? Yes No 2. Was Victim Rights Notice given to victim? Yes No IF NO, give reason: _____	
Supervisor's Signature (& Rank)				(PRINT and SIGN)								Page _____ of _____	
POLICE COPY (Please make a copy for DA's office if appropriate) NYS DOMESTIC VIOLENCE HOTLINE ENGLISH: 1-800-942-6906 SPANISH: 1-800-942-6908 3221-05/2011 DCJS Copyright © 2011 by NYS DCJS													

Agency				ORI		NEW YORK STATE DOMESTIC INCIDENT REPORT				Sprint # (NYC)		Incident #															
DATES	Report	Month	Day	Year	Time (24 hrs)	Address of Occurrence			APT #	Precinct (NYC/CTV)	Aided # (NYC)	Complaint #															
						How can we safely contact you? (e.g. Name, Phone)				<input type="radio"/> Officer-Initiated <input type="radio"/> Radio Run <input type="radio"/> Walk-In																	
VICTIM/PARTY1 (P1)	Name (Last, First, M.I.) / (include aliases)					Phone			DOB	Month	Day	Year	Age	<input type="radio"/> Male <input type="radio"/> Female													
	Street & City					APT #	Zip			If non-English, language: <input type="radio"/> Spanish <input type="radio"/> Chinese <input type="radio"/> Other: _____																	
SUSPECT / PARTY2 (P2)	Injured? <input type="radio"/> No <input type="radio"/> Yes					Removed to Hospital? <input type="radio"/> No <input type="radio"/> Yes If yes, what hospital? _____			<input type="radio"/> White <input type="radio"/> Black <input type="radio"/> Asian <input type="radio"/> American Indian <input type="radio"/> Other: _____	<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Unknown	Notes (e.g. special needs, disability, requests):																
	Describe: _____																										
SUSPECT / PARTY2 (P2)	Name (Last, First, M.I.) / (include aliases)					Phone			DOB	Month	Day	Year	Age	<input type="radio"/> Male <input type="radio"/> Female													
	Street & City					APT #	Zip			If non-English, language: <input type="radio"/> Spanish <input type="radio"/> Chinese <input type="radio"/> Other: _____																	
SUSPECT / PARTY2 (P2)	Injured? <input type="radio"/> No <input type="radio"/> Yes					Removed to Hospital? <input type="radio"/> No <input type="radio"/> Yes If yes, what hospital? _____			<input type="radio"/> White <input type="radio"/> Black <input type="radio"/> Asian <input type="radio"/> American Indian <input type="radio"/> Other: _____	<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Unknown	Prior DV History? <input type="radio"/> Yes <input type="radio"/> No Prior DV police report? <input type="radio"/> Yes <input type="radio"/> No Victim fearful? <input type="radio"/> Yes <input type="radio"/> No Suspect: Access to weapons? <input type="radio"/> Yes <input type="radio"/> No Drug/Alcohol history? <input type="radio"/> Yes <input type="radio"/> No Suicide threat history? <input type="radio"/> Yes <input type="radio"/> No																
	Describe: _____																										
SUSPECT / PARTY2 (P2)	LIVING SITUATION					RELATIONSHIP: (SUSPECT / P2 to VICTIM / P1)																					
	Do parties currently live together? <input type="radio"/> Yes <input type="radio"/> No IF NO, have they lived together in the past? <input type="radio"/> Yes <input type="radio"/> No Do the parties have a child-in-common? <input type="radio"/> Yes <input type="radio"/> No					Do parties currently live together? <input type="radio"/> Yes <input type="radio"/> No IF NO, have they lived together in the past? <input type="radio"/> Yes <input type="radio"/> No Do the parties have a child-in-common? <input type="radio"/> Yes <input type="radio"/> No																					
SUSPECT / PARTY2 (P2)	SUSPECT/P2 present? <input type="radio"/> Yes <input type="radio"/> No					Do parties currently live together? <input type="radio"/> Yes <input type="radio"/> No IF NO, have they lived together in the past? <input type="radio"/> Yes <input type="radio"/> No Do the parties have a child-in-common? <input type="radio"/> Yes <input type="radio"/> No																					
ASSOCIATED PERSONS	1. Name (Street / APT# / City, if needed)					Phone			DOB	Month	Day	Year	Relationship to victim / P1														
	2.																										
ASSOCIATED PERSONS	3.																										
SUSPECT ACTIONS	(Check all that apply)					Impaired Alcohol/Drugs			Pushing			Threw Items			Threats: (specify)			Threat with weapon									
	Biting Destroyed Property (Estimated \$ _____) Forced Entry Forcible Restraint Hair Pulling Homicide					Injury to Child Injury to Other Persons Injury to Pet/Animal Interference with Phone Intimidation/Coercion Kicking Punching			Sexual Assault Shooting Slapping Slamming Body Stabbing Strangulation/"Choking" Suicide or Attempt			Unwanted Contact Verbal Abuse Violated Visitation/Custody Conditions OTHER Suspect Actions: _____			Injure/Kill Persons Injure/Kill Self Injure/Kill Pet/Animal Take Child Destroy/Take Property Other: _____			Weapons used: (specify) Blunt Object Gun Motor Vehicle Sharp Instrument Other: _____									
ARREST	Arrest Made? <input type="radio"/> Yes <input type="radio"/> No					Arrest #			Reasons arrest not made on-scene: <input type="radio"/> No Offense Committed <input type="radio"/> No Probable Cause <input type="radio"/> Suspect Off-Scene <input type="radio"/> Warrant/Criminal Summons to be requested <input type="radio"/> Violation level: not in police presence (no citizen's arrest) <input type="radio"/> Other: _____																		
OFFENSES & OP	Offenses					Law (e.g. PL)			Section (Sub)			Charges Filed			Offenses Involved: (check all that apply) <input type="radio"/> Felony <input type="radio"/> Misdemeanor <input type="radio"/> Violation <input type="radio"/> Other (Specify) _____												
	1.											<input type="radio"/>			Registry Checked? <input type="radio"/> Yes <input type="radio"/> No Order of Protection? <input type="radio"/> Yes <input type="radio"/> No Stay Away Order? <input type="radio"/> Yes <input type="radio"/> No Order Violated? <input type="radio"/> Yes <input type="radio"/> No Any PRIOR orders? <input type="radio"/> Yes <input type="radio"/> No												
OFFENSES & OP	2.											<input type="radio"/>			OP Court Name: _____ <input type="radio"/> Family <input type="radio"/> Criminal <input type="radio"/> Supreme <input type="radio"/> Out of State <input type="radio"/> Tribal												
	3.											<input type="radio"/>			Expiration Date: _____ Month: _____ Day: _____ Year: _____												
STOP! _____ > ***** COMPLETE STATEMENT ON PAGE 2 NEXT ***** >																											
INVESTIGATION	Photos Taken? <input type="radio"/> Yes <input type="radio"/> No					IF YES, photos taken of: <input type="radio"/> Victim Injuries <input type="radio"/> Suspect Injuries <input type="radio"/> Scene <input type="radio"/> Damaged Property <input type="radio"/> Other: _____					Other evidence collected? <input type="radio"/> Yes <input type="radio"/> No IF YES, describe: _____																
	Results of investigation and basis of action taken. (Were excited utterances, spontaneous admissions or spontaneous statements made?) <input type="radio"/> Yes <input type="radio"/> No (Complete 710.30 or other form when applicable). _____																										
INVESTIGATION	Any Guns in House? <input type="radio"/> Yes <input type="radio"/> No Any Guns Seized? <input type="radio"/> Yes <input type="radio"/> No Household Member Has Pistol Permit? <input type="radio"/> Yes <input type="radio"/> No Permit Seized? <input type="radio"/> Yes <input type="radio"/> No Permit #(s): _____ Issuing County: _____ Name on Permit(s): _____																										
	Is there reasonable cause to suspect a child may be the victim of abuse, neglect, maltreatment, or endangerment? <input type="radio"/> Yes <input type="radio"/> No IF YES, officer must contact the NYS CHILD ABUSE HOTLINE REGISTRY # 1-800-635-1522																										
INVESTIGATION	IS SUSPECT ON PAROLE OR PROBATION? <input type="radio"/> Probation <input type="radio"/> Parole <input type="radio"/> Not Supervised <input type="radio"/> Status Unknown																										
	CONTACTS INITIATED BY POLICE: <input type="radio"/> Domestic Violence Services <input type="radio"/> Child Protective Services (or ACS) <input type="radio"/> Other Agency: _____																										
INVESTIGATION	Officer's Signature (& Rank)					(PRINT and SIGN)					I.D.			Month			Day			Year			1. Was DIR given to the victim at the scene? <input type="radio"/> Yes <input type="radio"/> No			Page	
	Supervisor's Signature (& Rank)					(PRINT and SIGN)																	2. Was Victim Rights Notice given to victim? <input type="radio"/> Yes <input type="radio"/> No IF NO, give reason: _____			of _____	
NYS DIVISION OF CRIMINAL JUSTICE SERVICES COPY NYS DOMESTIC VIOLENCE HOTLINE ENGLISH: 1-800-942-6906 SPANISH: 1-800-942-6908 3221-05/2011 DCJS Copyright © 2011 by NYS DCJS																											

Agency					NEW YORK STATE DOMESTIC INCIDENT REPORT					Sprint # (NYC)			Incident #			
DATES	Report	Month	Day	Year	Time (24 hrs)	Address of Occurrence				APT #	Precinct (NYC)/CTV	Aided # (NYC)		Complaint #		
	Occured															
											<input type="radio"/> Officer-Initiated <input type="radio"/> Radio Run <input type="radio"/> Walk-In					
VICTIM/PARTY1 (P1)	Name (Last, First, M.I.) / (include aliases)										DOB	Month	Day	Year	Age	<input type="radio"/> Male <input type="radio"/> Female
											If non-English, language: <input type="radio"/> Spanish <input type="radio"/> Chinese <input type="radio"/> Other: _____					
VICTIM/PARTY2 (P2)	Injured? <input type="radio"/> No <input type="radio"/> Yes					Removed to Hospital? <input type="radio"/> No <input type="radio"/> Yes If yes, what hospital? _____		<input type="radio"/> White <input type="radio"/> Black <input type="radio"/> Asian <input type="radio"/> American Indian <input type="radio"/> Other: _____		<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Unknown						
	Describe: _____															
SUSPECT / PARTY2 (P2)	Name (Last, First, M.I.) / (include aliases)					Phone			DOB	Month	Day	Year	Age	<input type="radio"/> Male <input type="radio"/> Female		
	Street & City					APT #		Zip		If non-English, language: <input type="radio"/> Spanish <input type="radio"/> Chinese <input type="radio"/> Other: _____						
	Injured? <input type="radio"/> No <input type="radio"/> Yes					Removed to Hospital? <input type="radio"/> No <input type="radio"/> Yes If yes, what hospital? _____		<input type="radio"/> White <input type="radio"/> Black <input type="radio"/> Asian <input type="radio"/> American Indian <input type="radio"/> Other: _____		<input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic <input type="radio"/> Unknown		Prior DV History? <input type="radio"/> Yes <input type="radio"/> No				
	Describe: _____											Prior DV police report? <input type="radio"/> Yes <input type="radio"/> No				
SUSPECT / PARTY2 (P2)	SUSPECT/P2 present? <input type="radio"/> Yes <input type="radio"/> No					LIVING SITUATION Do parties currently live together? <input type="radio"/> Yes <input type="radio"/> No IF NO, have they lived together in the past? <input type="radio"/> Yes <input type="radio"/> No Do the parties have a child-in-common? <input type="radio"/> Yes <input type="radio"/> No					RELATIONSHIP: (SUSPECT / P2 to VICTIM / P1) <input type="radio"/> Married <input type="radio"/> Formerly Married <input type="radio"/> Intimate Partner/Dating <input type="radio"/> Former Intimate/Dating <input type="radio"/> Child of victim/party 1 <input type="radio"/> Parent of victim/party 1 <input type="radio"/> Relative: _____ <input type="radio"/> Other: _____					
ASSOCIATED PERSONS																
SUSPECT ACTIONS	(Check all that apply) <input type="radio"/> Biting <input type="radio"/> Impaired Alcohol/Drugs <input type="radio"/> Pushing <input type="radio"/> Threw Items <input type="radio"/> Threats: (specify) <input type="radio"/> Destroyed Property (Estimated \$ _____) <input type="radio"/> Injury to Child <input type="radio"/> Sexual Assault <input type="radio"/> Unwanted Contact <input type="radio"/> Injure/Kill Persons <input type="radio"/> Forced Entry <input type="radio"/> Injury to Other Persons <input type="radio"/> Shooting <input type="radio"/> Verbal Abuse <input type="radio"/> Injure/Kill Self <input type="radio"/> Forcible Restraint <input type="radio"/> Injury to Pet/Animal <input type="radio"/> Slapping <input type="radio"/> Violated Visitation/Custody Conditions <input type="radio"/> Injure/Kill Pet/Animal <input type="radio"/> Hair Pulling <input type="radio"/> Interference with Phone <input type="radio"/> Slamming Body <input type="radio"/> Take Child <input type="radio"/> Homicide <input type="radio"/> Intimidation/Coercion <input type="radio"/> Stabbing <input type="radio"/> OTHER Suspect Actions: _____ <input type="radio"/> Destroy/Take Property <input type="radio"/> Other: _____															
	<input type="radio"/> Threat with weapon <input type="radio"/> Weapons used: (specify) <input type="radio"/> Blunt Object <input type="radio"/> Gun <input type="radio"/> Motor Vehicle <input type="radio"/> Sharp Instrument <input type="radio"/> Other: _____															
ARREST	Arrest Made? <input type="radio"/> Yes <input type="radio"/> No		Arrest #		Reasons arrest not made on-scene: <input type="radio"/> No Offense Committed <input type="radio"/> No Probable Cause <input type="radio"/> Suspect Off-Scene <input type="radio"/> Warrant/Criminal Summons to be requested <input type="radio"/> Violation level: not in police presence (no citizen's arrest) <input type="radio"/> Other: _____											
OFFENSES & OP	Offenses				Law (e.g. PL)	Section (Sub)	Charges Filed	Offenses Involved: (check all that apply) <input type="radio"/> Felony <input type="radio"/> Misdemeanor <input type="radio"/> Violation <input type="radio"/> Other (Specify) _____								
	1.						<input type="radio"/>	Registry Checked? <input type="radio"/> Yes <input type="radio"/> No OP Court Name: _____								
	2.						<input type="radio"/>	Order of Protection? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Family <input type="radio"/> Criminal <input type="radio"/> Supreme								
	3.						<input type="radio"/>	Stay Away Order? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Out of State <input type="radio"/> Tribal Order Violated? <input type="radio"/> Yes <input type="radio"/> No Expiration Date Month Day Year Any PRIOR orders? <input type="radio"/> Yes <input type="radio"/> No								
STOP! > ***** COMPLETE STATEMENT ON PAGE 2 NEXT ***** >																
INVESTIGATION	Photos Taken? <input type="radio"/> Yes <input type="radio"/> No		IF YES, photos taken of: <input type="radio"/> Victim Injuries <input type="radio"/> Suspect Injuries <input type="radio"/> Scene <input type="radio"/> Damaged Property <input type="radio"/> Other: _____				Other evidence collected? <input type="radio"/> Yes <input type="radio"/> No IF YES, describe: _____									
	Results of investigation and basis of action taken. (Were excited utterances, spontaneous admissions or spontaneous statements made?) <input type="radio"/> Yes <input type="radio"/> No (Complete 710.30 or other form when applicable). _____															

	Any Guns in House? <input type="radio"/> Yes <input type="radio"/> No Any Guns Seized? <input type="radio"/> Yes <input type="radio"/> No Household Member Has Pistol Permit? <input type="radio"/> Yes <input type="radio"/> No Permit Seized? <input type="radio"/> Yes <input type="radio"/> No Permit #(s): _____ Issuing County: _____ Name on Permit(s): _____															
	Is there reasonable cause to suspect a child may be the victim of abuse, neglect, maltreatment, or endangerment? <input type="radio"/> Yes <input type="radio"/> No IF YES, officer must contact the NYS CHILD ABUSE HOTLINE REGISTRY # 1-800-635-1522															
IS SUSPECT ON PAROLE OR PROBATION? <input type="radio"/> Probation <input type="radio"/> Parole <input type="radio"/> Not Supervised <input type="radio"/> Status Unknown CONTACTS INITIATED BY POLICE: <input type="radio"/> Domestic Violence Services <input type="radio"/> Child Protective Services (or ACS) <input type="radio"/> Other Agency: _____																
Officer's Signature (& Rank) (PRINT and SIGN)					I.D.	Month	Day	Year	1. Was DIR given to the victim at the scene? <input type="radio"/> Yes <input type="radio"/> No 2. Was Victim Rights Notice given to victim? <input type="radio"/> Yes <input type="radio"/> No IF NO, give reason: _____					Page _____ of _____		
Supervisor's Signature (& Rank) (PRINT and SIGN)																
VICTIM / COMPLAINANT COPY NYS DOMESTIC VIOLENCE HOTLINE ENGLISH: 1-800-942-6906 SPANISH: 1-800-942-6908 3221-05/2011 DCJS Copyright © 2011 by NYS DCJS																

IF YOU ARE THE VICTIM OF DOMESTIC VIOLENCE, THE POLICE AND COURTS CAN HELP.

What the Police Can Do:

- * Assist you with finding a safe place, a place away from the violence.
- * Inform you about how the court can help protect you from the violence.
- * Help you and your children get medical care for any injuries you received.
- * Assist you in getting necessary belongings from your home.
- * Provide you with copies of police reports about the violence.
- * File a complaint in criminal court, and tell you where your local criminal and family courts are located.

What the Courts Can Do:

- * If the person who harmed you or threatened you is a relative by blood or marriage, or is someone you’ve had a child with, or is someone with whom you are or have had an intimate relationship, then you have the right to take your case to family court, criminal court or both.
- * The forms you need are available from the family court and the criminal court.
- * The courts can decide to provide a temporary order of protection for you, your children and any witnesses who may request one.
- * The family court may appoint a lawyer to help you if the court finds that you cannot afford one.
- * The family court may order temporary child support and temporary custody of your children.

New York Law States: "If you are the victim of domestic violence, you may request that the officer assist in providing for your safety and that of your children, including providing information on how to obtain a temporary order of protection. You may also request that the officer assist you in obtaining your essential personal effects and locating and taking you, or assist in making arrangements to take you, and your children to a safe place within such officer's jurisdiction, including but not limited to a domestic violence program, a family member's or a friend's residence, or a similar place of safety. When the officer's jurisdiction is more than a single county, you may ask the officer to take you or make arrangements to take you and your children to a place of safety in the county where the incident occurred. If you or your children are in need of medical treatment, you have the right to request that the officer assist you in obtaining such medical treatment. You may request a copy of any incident reports at no cost from the law enforcement agency. You have the right to seek legal counsel of your own choosing and if you proceed in family court and if it is determined that you cannot afford an attorney, one must be appointed to represent you without cost to you." "You may ask the district attorney or a law enforcement officer to file a criminal complaint. You also have the right to file a petition in the family court when a family offense has been committed against you. You have the right to have your petition and request for an order of protection filed on the same day you appear in court, and such request must be heard that same day or the next day court is in session. Either court may issue an order of protection from conduct constituting a family offense which could include, among other provisions, an order for the respondent or defendant to stay away from you and your children. The family court may also order the payment of temporary child support and award temporary custody of your children. If the family court is not in session, you may seek immediate assistance from the criminal court in obtaining an order of protection. The forms you need to obtain an order of protection are available from the family court and the local criminal court. The resources available in this community for information relating to domestic violence, treatment of injuries, and places of safety and shelters can be accessed by calling the following 800 numbers. Filing a criminal complaint or a family court petition containing allegations that are knowingly false is a crime." (NYS Criminal Procedure Law, Section 530.11 (6))



NEW YORK STATE 24 HOUR DOMESTIC VIOLENCE HOTLINES

**English 1-800-942-6906 Spanish 1-800-942-6908
NEW YORK CITY (all languages) 1-800-621-4673**

**TTY/TDD FOR THE HEARING IMPAIRED: English 1-800-818-0656 or Spanish 1-800-780-7660
New York City TTY/TDD 1-866-604-5350**

Note: all New York State phone and TTY/TDD hotlines include language banks to 140 different languages



VICTIM INFORMATION AND NOTIFICATION EVERYDAY (VINE)

Victims may receive information relating to the status and release dates of persons incarcerated in state prison or local jails in New York State. For more information on this program and how you can register, call

1-888-VINE-4NY (1-888-846-3469) This is an automated system.

COURT INFORMATION

New York City—Criminal Court Information 1-646-386-4500

To obtain court information for other areas of NYS, ask the responding officer for court numbers, consult your phone directory, or call the Domestic Violence Hotline (phone number provided above)



SI USTED ES VÍCTIMA DE LA VIOLENCIA DOMÉSTICA, LA POLICÍA Y LAS CORTES LE PUEDEN AYUDAR

Lo que puede hacer la policía:

- * Ayudarle a encontrar un lugar seguro, un lugar lejos de la violencia.
- * Informarle cómo la corte puede ayudar a protegerle de la violencia.
- * Ayudarle a obtener atención médica para heridas o lesiones que usted y sus hijos pudieran haber sufrido.
- * Ayudarle a sacar de su hogar las pertenencias necesarias.
- * Proveerle copias de informes de la policía sobre la violencia.
- * Presentar una querrela ante la corte criminal e informarle sobre la localización de la corte criminal y de la corte de familia en su comunidad.

Lo que pueden hacer las cortes:

- * Si la persona que le hizo daño o que lo amenazó es su pariente o pariente político, o es alguien con quien usted tuvo un hijo, o alguien con quien usted tiene o ha tenido una relación íntima, entonces usted tiene el derecho de llevar el caso a la corte familiar, corte criminal, o ambos.
- * Puede obtener los formularios que necesita en la corte de familia y la corte criminal.
- * Las cortes podrían proveerle una orden de protección provisional para usted, sus hijos, y cualquier testigo que así lo pida.
- * Si la corte determina que usted no puede pagar por los servicios de un abogado, la corte puede asignarle uno.
- * La corte de familia puede otorgarle manutención provisional para sus hijos, así como la custodia provisional de sus hijos.

La Ley de Nueva York establece que: "Si usted es víctima de violencia doméstica, puede pedirle al oficial de la policía que resguarde su seguridad y la de sus hijos. Incluso, puede pedirle que le proporcione información sobre cómo obtener una orden temporal de protección. Asimismo, puede solicitar que dicho oficial de la policía le ayude a obtener sus efectos personales esenciales y a localizar un lugar seguro, al igual que transportarle a usted y a sus hijos a dicho lugar, o ayudarle a hacer arreglos para obtener dicha transportación dentro de la jurisdicción de dicho oficial de la policía, incluyendo pero sin limitarse a transportación a un programa que provea servicios contra la violencia doméstica, la residencia de un miembro de su familia o la residencia de un amigo, o un lugar que sea igualmente seguro. Cuando la jurisdicción de dicho oficial de la policía abarca más de un condado, usted puede pedirle al oficial que le transporte o que haga arreglos para transportarle a usted y a sus hijos a un lugar seguro en el condado donde ocurrió el incidente. Si usted o sus hijos necesitan tratamiento médico, usted tiene derecho a solicitar que dicho oficial de la policía le ayude a obtener dicho tratamiento médico. Usted puede solicitar que la agencia policial le provea una copia gratis de cualquier informe del incidente. Usted tiene derecho a buscar y escoger su propio consejero legal y si usted procede a utilizar la corte de familia y se determina que usted no puede pagar por los servicios de un abogado, uno deberá ser designado para que le represente sin costo para usted." "Usted puede pedirle al fiscal de distrito o a un oficial de la policía que radique una querrela criminal. Usted también tiene derecho a presentar una petición ante la corte de familia cuando una ofensa de familia ha sido cometida contra usted. Usted tiene derecho a presentar dicha petición y a solicitar una orden de protección el mismo día que usted comparece ante la corte, y dicha petición debe ser vista por la corte ese mismo día, o el próximo día en que la corte esté en sesión. Cualquiera de las cortes puede expedir una orden de protección contra una conducta que constituya una ofensa de familia, la cual puede incluir entre otras disposiciones, una orden contra el demandado o acusado que le requiera permanecer lejos de usted y de sus niños. La corte de familia también puede ordenar el pago temporal de manutención para sus niños y otorgarle a usted la custodia temporal de sus niños. Si la corte de familia no está en sesión, usted puede solicitar ayuda inmediata de la corte criminal para obtener una orden de protección. Los formularios que usted necesita para obtener una orden de protección están disponibles en la corte de familia y en la corte criminal local. Para acceso a los recursos disponibles en esta comunidad que proveen información sobre violencia doméstica, tratamiento de lesiones, y lugares seguros y refugios, llame a los siguientes números gratuitos. Es un crimen radicar una querrela criminal o una petición ante la corte de familia, a sabiendas de que dicha querrela o petición contiene alegaciones falsas." (NYS Criminal Procedure Law, Section 530.11 (6))

**Información de Asistencia a la Víctima
Teléfonos de Ayuda Contra la Violencia Doméstica**



Estado de Nueva York (inglés) 1-800-942-6906 ó (español) 1-800-942-6908
TTY/TDD para personas con impedimento auditivo (inglés) 1-800-818-0656 ó (español) 1-800-780-7660
(incluye un banco de 140 idiomas diferentes)
En la ciudad de Nueva York 1-800-621-4673 (servicio de TTY/TDD, aparato de telecomunicaciones para sordos 1-866-604-5350)

Información y Notificación Diaria Para La Víctima (VINE)



Las víctimas pueden recibir información relacionada con el estado y la fecha de excarcelación de personas encarceladas en prisiones estatales o en cárceles locales en el Estado de Nueva York.
Para más información sobre este programa y como puede registrarse, llame al
1-888-VINE-4NY (1-888-846-3469). Esto es un sistema automatizado.

Información de la Corte

La ciudad de Nueva York—Información de la corte de criminal del condado **(1-646-386-4500)**
Para obtener la información de la corte para otras áreas de NYS, pedirle al official de la policía que responde los números de la corte, consulte su guía de telefonos, o llame el teléfono de Ayuda contra la violencia doméstica (número de teléfono proporcionado arriba).

