



# Sea Isle City Police Department

233 John F. Kennedy Boulevard, 1<sup>st</sup> Floor

Sea Isle City, New Jersey 08243

Police: (609) 261-4311

www.seaislecitynj.us

Thomas McQuillen  
Chief of Police

<b>Officer Name Print</b>	<b>Rank</b>	<b>Badge Number</b>	<b>Incident Number</b>
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**Above information to be completed by police personnel.**

This item stolen shall be listed below as soon as possible. This will include information as to quantity, make, model, owner applied numbers (OAN), serial numbers, description or any other pertinent information that would simplify identifying the stolen articles. List the current market value of the article(s) stolen, if known, or estimate value and total same. If additional space is needed, use another Victim Property Loss Report Form, and attach Page 1. Number each page and indicate total number of pages. Complete Victim Identification section of all pages.

Note: Any person who gives or causes to be given false information to any law enforcement officer, with respect to the commission of any crime or incident, is guilty of a fourth degree crime under the New Jersey Code of Criminal Justice (2C:28-4). Fourth degree crimes are punishable by a fine of not more than \$1,000.00, or by imprisonment for not more than 18 months, or both.

**PROPERTY/VICTIM IDENTIFICATION SECTION**

QUANTITY	ITEM/ARTICLE	MAKE	MODEL	O.A.N.	SERIAL NUMBER	DESCRIPTION	VALUE
						Total Value	

I hereby report the above listed items As stolen from me on Date:	Name of Victim (Print)	Address of Victim	
	Signature of Victim	Telephone Number	Page _____ of



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## SEA ISLE CITY POLICE DEPARTMENT

### VICTIM PROPERTY LOSS REPORT CONTINUATION

QUANTITY	ITEM/ARTICLE	MAKE	MODEL	O.A.N.	SERIAL NUMBER	DESCRIPTION	VALUE
						Total Value	