

DO YOU SUSPECT ILLEGAL ACTIVITY IN YOUR NEIGHBORHOOD?

HOW TO REPORT INFORMATION THAT CAN HELP THE POLICE

The Wayne County Sheriff's Office need the help of citizens, to report suspicious activity that could be drug related. Only the people living in a neighborhood know when strangers are present on their street. If you think there may be drug trafficking in your area the following tips provided by the Wayne County Sheriff's Office can be used to gather important information.

When you report suspected drug activity get all your information together before you call, try to be specific as possible. Information about what you have observed yourself is the most valuable. Word-of-mouth or indirect information can be reported, but is often considered to be hearsay or second-hand knowledge, especially if reported by an anonymous caller.

In calling to report suspected drug activity try to provide as much of the following information as possible:

- Street name, house number, and description of the house where there is suspected drug activity-BE SPECIFIC!
- Doors used by customers.
- Property owner's name.
- Busiest time of day that activity has been observed-also busiest day of the week.
- Can you identify what type of narcotics are being sold?
- Do you know where the person works, description of the vehicle they drive and the license number?



Citizens are also reminded that a telephone call to the police will not generate a raid. The drug problem is a serious nationwide problem and police resources are used to get the maximum results in the most effective way.

CITIZENS AGAINST DRUGS

It may also take weeks or longer to get the necessary evidence so a search warrant can be obtained. Please have patience. You may telephone the Wayne County Sheriff's Office, or your local police agency. You can also send mail with your information on drug houses to Wayne County Sheriff's Office, 1231 St. Antoine, Detroit, MI 48226.

You do not have to give your name or identify yourself in anyway, however a citizen who is willing to be contacted by telephone is often helpful.

Your information will remain confidential.

SUSPECTED DRUG HOUSE REPORTING FORM

Date: _____ 20 _____

Address: _____

Apt. _____ City, State, Zip _____

Description of house: _____

Door used by customers: _____

Rental: _____ yes _____ no _____

Owner: _____

Telephone: _____
Comments: (Why do you believe this is a drug house?) _____

Hours of Operation: _____

(Day of the week) (Business times)

Type of drugs being sold: _____

RESIDENTS:

NAME-(NICKNAME) RACE SEX AGE

1. _____ 1. _____ 1. _____ 1. _____

2. _____ 2. _____ 2. _____ 2. _____

3. _____ 3. _____ 3. _____ 3. _____

RESIDENT'S VEHICLES:

COLOR YR MAKE MODEL LIC#

PERSON REPORTING: (OPTIONAL)

Name: _____

Address: _____

Home Phone: _____

Work Phone: _____

Alternate: _____

**WAYNE COUNTY
SHERIFF'S OFFICE
SHERIFF
BENNY N. NAPOLEON**