**ABANDONED VEHICLE REPORT**

DATE OF REPORT TIME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LOCATION OF VEHICLE

ON COUNTY RIGHT OF WAY? 🞏 YES 🞏 NO HOW LONG THERE?

COMPLAINANT 🞏 SEE ATTACHED CASE

ADDRESS

PHONE OTHER

Vehicle Information

LICENSE STATE YEAR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MAKE MODEL STYLE COLOR

VIN TAB EXPIRATION

VEHICLE SOLD? 🞏 YES 🞏 NO If ‘YES’ enter “None-Vehicle Sold mm/dd/yyyy” in Registered Owner name space. If purchaser is identified via registration or report of sale query enter name and address in Legal Owner spaces. If not enter “None”.

REGISTERED OWNER NAME

R/O ADDRESS

R/O CITY STATE ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LEGAL OWNER OR PURCHASER NAME

L/O ADDRESS

L/O CITY STATE ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

R/O OR PURCHASER TELEPHONE 🞏 NO LISTING FOUND

Action Taken

24 HOUR TAG AFFIXED: DATE TIME ID

CHALK MARK APPLIED? 🞏 YES 🞏 NO

OWNER CONTACTED? 🞏 YES 🞏 NO 🞏 LEFT MESSAGE 🞏 NO ANSWER

REMARKS

DEPUTY/OFFICER ID

VEHICLE GONE ON ARRIVAL: DATE TIME ID

(On follow-up check)

KCSO/COP Rev. 5-17