



Loss of Property Intake Form – Form #6031

Complainant Information

Complainant Name:	Date Reported:
Local Address:	Cell #:
Perm. Address	Local Phone Number:

Type of Activity

- | | |
|---|--|
| <input type="checkbox"/> Loss/Theft of Personal Property (NCTC recommends you contact your local law enforcement at 681-6161 or 773-1104) | <input type="checkbox"/> Loss/Theft of NCTC Property |
|---|--|

Location of Incident – Check all that apply

- | | | |
|---|--|--|
| <input type="checkbox"/> Office | <input type="checkbox"/> TRF Campus | <input type="checkbox"/> Parking Lot |
| <input type="checkbox"/> Airport Campus EGF | <input type="checkbox"/> Multi-Events Center | <input type="checkbox"/> Swenson House |
| <input type="checkbox"/> Campus | <input type="checkbox"/> Other (explain): | |

Details

Description/Details of Incident:

Please be as specific as possible.

Date of incident:

Time of incident: If unsure, between and .

Specific location (room # or hallway) closest to where incident occurred:

Description of what happened/how theft occurred:

Value of property \$

Description of missing item(s):

Security Officer's Report

State of Minnesota Identification Tag #

When complete, please e-mail to NCTC Security Officer security@northlandcollege.edu