|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Form 1 - Initial Neighborhood Canvass Tool** | | | | | | | | | | | Street Address: | | | | | Case #: | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | |
| Date | | | Time | | Officer/Name/Badge | | | | | Status | | | | | Date | | | | Time | | | Officer/Name/Badge | | | | | | Status | |
|  | | |  | |  | | | | |  | | | | |  | | | |  | | |  | | | | | |  | |
| Team/Group #: | | | | |  | | | Missing Child’s Residence Can Be Seen From This Property? | | | | | | | | | | | | | | | | | | | Yes No | | |
| Resident Name: | | | | | |  | | | | | | | | | | | | DOB: | |  | | | | SS #: | |  | | | |
| 1 | Do you know the missing person? | | | | | | | |  | | | | | 2 | | | How long have you lived at this residence? | | | | | | | | | | | |  |
| 3 | When was the last time you saw him/her? | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| 4 | What activity did you see near the missing person’s home on the day of the incident? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 | What vehicles did you see in the area near the time of the incident? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 | Who do you remember hearing or seeing in the neighborhood around the time of the incident? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 | What have you heard about the family? | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
| 9 | Who was (Use name of missing person) usually with when you saw him/her? Anyone new to the person? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | Where do children congregate/play in the neighborhood- anywhere that they could be injured or trapped? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11 | Can you think of anyone in the neighborhood you would describe as “strange” or “unusual”? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12 | Does the home have a video surveillance system/Door Camera? Interior Only Interior/Exterior Exterior Only  (If yes to any Advise Command) Describe Cameras Below | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13 | Obtain Consent to Search Home/Cars/Sheds/Trailers | | | | | | | | | | | | | | Indicate Areas Searched Below (Describe/List Veh Registration | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14 | Ask the person if any cars have left their home since the person went missing? If so, describe below.  Can the person contact the driver and ask them to check vehicle and/or return | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | Did vehicle return? | | | | | Yes No | | | |
| 15 | Has there been any construction including road work, housework, or landscapers in the area recently? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16 | Ask the person if they have had any visitors today? (Phrase question to ask if they had any visitors within 8 hours of missing person) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17 | Is there anything else you would like to tell us about this incident? | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18 | | Officer Comments: | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
| Date | | | | Status | | | | | | | | | | | | | | | | | | | | | Initials | | | | |
|  | | | | Expanded Canvas Interviews Possibly Needed Additional Expanded Canvass Interview Needed No Follow-up Needed\*(Requires Written Comments) | | | | | | | | | | | | | | | | | | | | | Investigator: | | | | |
|  | | | | |
|  | | | | Expanded Canvas Interviews Possibly Needed Additional Expanded Canvass Interview Needed No Follow-up Needed\* Requires Written Comments) | | | | | | | | | | | | | | | | | | | | | Commander: | | | | |
|  | | | | |