



**SHERIFF'S OFFICE, COUNTY OF SUFFOLK, N.Y.**  
 ACCREDITED LAW ENFORCEMENT AGENCY  
**CIVIL ENFORCEMENT SECTION**  
 360 YAPHANK AVENUE, SUITE 1A  
 YAPHANK, N.Y. 11980  
 (631) 852-5600



**VINCENT F. DeMARCO**  
 SHERIFF

# WARRANT OF ARREST ENFORCEMENT INFORMATION

**INSTRUCTIONS:** Please complete this form with as much information possible.

DEFENDANT'S NAME (LAST/FIRST/M.I.)

## PART I – MUST COMPLETE ALL INFORMATION

DATE OF BIRTH	AGE	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	HEIGHT Ft. In.	WEIGHT
RACE <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Indian <input type="checkbox"/> Other			SKIN COLOR <input type="checkbox"/> Light <input type="checkbox"/> Medium <input type="checkbox"/> Dark	
DISTINGUISHING IDENTIFIERS (GLASSES, MUSTACHE, BEARD, SCARS, TATTOOS, ETC.)				

## PART II – ADDRESS/EMPLOYMENT

ADDRESS (STREET NO./STREET NAME/APT. NO./HAMLET)

RESIDENCE COLOR/APARTMENT COMPLEX INFORMATION

LAST KNOWN PHONE NO. SOCIAL SECURITY NO. LAST KNOWN OCCUPATION

LAST KNOWN EMPLOYER PHONE NO.

## PART III – VEHICLE(S) OWNED/OPERATED

MAKE	MODEL	COLOR	PLATE NO.	STATE
LOCATION VEHICLE USUALLY PARKED				

MAKE	MODEL	COLOR	PLATE NO.	STATE
LOCATION VEHICLE USUALLY PARKED				

## PART IV – PLAINTIFF ATTORNEY INFORMATION

PLAINTIFF ATTORNEY NAME/FIRM

PLAINTIFF ATTORNEY PHONE NO. ATTORNEY FILE NO.