ROCK HILL POLICE DEPARTMENT

120 EAST BLACK ST ROCK HILL, SC 29730 803-329-7230

SILENT WITNESS FORM

Description of illegal activity:
Street address of illegal activity:
Brief description of the house (Color, location, street, block number, 1 or 2 story)
Are there certain times when most of the activity is going on? Mornings Afternoons Evenings Weekends
Certain day(s) of the week? Which?
Beginning of the Month? End of the Month?
If reporting illegal drug sales, Where are the drugs sold?
□ Front Door □ Back Door □ Right Side Door □ Left Side Door
Other:
Do you smell any chemicals?
Average number of visitors in a 3-hour period?
How much time visitors stay at the house?
Describe Security at this Residence:
Boarded Windows Bars on Windows Re-enforced doors Weapons Unknown
Other security – Where?

	nown) of suspected illegal active the names, give a description of	
Cars of residents and visitor		
Year and Make	License Plates	State
**PLEASE RETURN	FORM TO:	
Mail: Rock Hill Police De	nartment	
120 East Black Stree Rock Hill, south Car	et	
	unity Services Center	
Emmett Scott Cente 801 Crawford Road Rock Hill, South Ca		
Hand Delivered To:		
Housing & Neighbo Corner of Hampton	rhood Services Offices and Johnston Streets	

ALL INFORMATION RECEIVED WILL BE KEPT CONFIDENTIAL