

Cypress College
Department of Campus Safety
Public Safety Log

DATE / TIME REPORTED	DATE / TIME OCCURRED	INCIDENT	CODE
12-02-23 / 08:45 am	12-02-23 / 08:45 am	Traffic Collision	20002 CVC
INCIDENT LOCATION			
Parking Lot 1			
INCIDENT SUMMARY:			
Campus Safety Officers documented an incident in which a vehicle was damaged. The driver of the striking vehicle failed to provide any contact information.			
DISPOSITION: <input type="checkbox"/> Open <input type="checkbox"/> Pending <input checked="" type="checkbox"/> Closed <input type="checkbox"/> Student Disciplinary Referral <input type="checkbox"/> Unfounded <input checked="" type="checkbox"/> Advised / Assisted <input type="checkbox"/> No Crime <input type="checkbox"/> Other <input type="checkbox"/> Citation <input type="checkbox"/> Arrest <input type="checkbox"/> F.I. Card <input type="checkbox"/> (e)Notification / Timely Warning Issued <input type="checkbox"/> Building Secured <input checked="" type="checkbox"/> Extra Patrol <input type="checkbox"/> Medical <input type="checkbox"/> Transported			
Campus Safety Report NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Report # 23-290		Police Report NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> Report #	Police Event #

DATE / TIME REPORTED	DATE / TIME OCCURRED	INCIDENT	CODE
12-02-23 / 02:57 pm	12-02-23 / 12:00 pm - 02:50 pm	Damage to Parked Vehicle	20002 CVC
INCIDENT LOCATION			
Parking Lot 5			
INCIDENT SUMMARY:			
Campus Safety Officers documented an incident in which a parked vehicle had been damaged.			
DISPOSITION: <input type="checkbox"/> Open <input type="checkbox"/> Pending <input type="checkbox"/> Closed <input type="checkbox"/> Student Disciplinary Referral <input type="checkbox"/> Unfounded <input checked="" type="checkbox"/> Advised / Assisted <input type="checkbox"/> No Crime <input type="checkbox"/> Other <input type="checkbox"/> Citation <input type="checkbox"/> Arrest <input type="checkbox"/> F.I. Card <input type="checkbox"/> (e)Notification / Timely Warning Issued <input type="checkbox"/> Building Secured <input type="checkbox"/> Extra Patrol <input type="checkbox"/> Medical <input type="checkbox"/> Transported			
Campus Safety Report NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Report # 23-291		Police Report NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> Report #	Police Event #