VERIFICATION OF CRIME/ LOST PROPERTY
PD 542-061 (Rev. 09-06)

Do Not Detach — Submit In Duplicate

5

Complainant/Victims will be sent verification free of charge, other applicants must send a **non-refundable** processing fee of $15.00 (Check or Money Order – **NO CASH**) payable to the NYC Police Department with each application. All applicants must enclose a stamped self-addressed envelope. Please mail requests to: New York City Police Department, Criminal Records Section (Verification Unit), 1 Police Plaza, Room 300, New York, NY 10038.

* Complaint Number	Precinct of Report
5989 5985	34th

FOR USE BY CRIMINAL RECORDS SECTION

Applicant's File No. 000159

CRIMINAL RECORDS SECTION

Mail Record To:
(Print or Type)
Dr. G. Scott
83 Park Terrace W., Apt 3A ~~NY, NY 10034~~
NY, NY 10034

1. Exact location where crime / loss took place
83 Park Terrace W, NY NY 10034

Precinct of Occurrence 34

2. Date reported to Police ~~reported~~ 8/27/15; on 11/4/15 because original report "lost"
Time (if known) ~~8:16 a.m.~~ 0920
This report concerns: ☒ Crime ☐ Lost Property ☒ Other (describe) ① Harassment on stairs ② False accusation to 911 operator

3. Full name and address of complainant/victim as reported to Police Department
Gregory SCOTT, same addr as above

Date and Time of Crime / Loss of Property (if different than date of report)
DATE 8/27/15 TIME 1850-1900 ~~2710 pm~~
Name of officer who received your report, if known. Fernandez or Hernandez? But they never input it apparently. Then Murphy & Rosario on 11/4.

Any additional information which may aid in searching for your record
8/27 one was "lost" according to 34th. Redid on 11/4/15.

* **INSTRUCTIONS:** In order to find this record you **MUST** furnish all information requested above, particularly the complaint number and precinct of record (Occurrence). Verification of your request cannot be made without this information. The complaint number may be obtained by calling the precinct or detective squad concerned during the hours of 9 a.m. to 5 p.m. **Do Not Detach — Submit In Duplicate.**

Applicant's Signature	Date	Name and address of insurance company	Date
Gregory Scott	11/20/15	n/a	

FOR POLICE DEPARTMENT USE ONLY

FOLLOWING IS A VERIFICATION OF THE ABOVE REQUEST

MOTOR VEHICLES

CURRENCY

JEWELRY

FURS – CLOTHING

FIREARMS

OFFICE EQUIPMENT

T.V., RADIOS, CAMERAS, ETC.

HOUSEHOLD GOODS

CONSUMABLE GOODS

MISCELLANEOUS

NEW YORK POLICE DEPARTMENT CRIMINAL RECORDS SECTION 1 POLICE PLAZA, RM 300 NEW YORK, NY 10038

NEW YORK POLICE DEPARTMENT CRIMINAL RECORDS SECTION 1 POLICE PLAZA, RM 300 NEW YORK, NY 10038

BRIEFLY DESCRIBE MANNER OF CRIME / LOSS OF PROPERTY

Harassment / Residence —

Complainant states that while complainant was coming down from the fourth floor person landlord son did stopped complainant blocking him causing annoyance and alarm stated to complainant that complainant can't check other floors in his building. —

detective squad concerned during the hours of 9 a.m. to 5 p.m. **Do Not Detach — Submit in Duplicate.**

Applicant's Signature	Date	Name and address of insurance company	Date
[signature]	11/20/15	N/a	

FOR POLICE DEPARTMENT USE ONLY

FOLLOWING IS A VERIFICATION OF THE ABOVE REQUEST

MOTOR VEHICLES

CURRENCY

JEWELRY

FURS – CLOTHING

FIREARMS

OFFICE EQUIPMENT

T.V., RADIOS, CAMERAS, ETC.

HOUSEHOLD GOODS

CONSUMABLE GOODS

MISCELLANEOUS

NEW YORK POLICE DEPARTMENT
CRIMINAL RECORDS SECTION
1 POLICE PLAZA, RM 300
NEW YORK, NY 10038

NEW YORK POLICE DEPARTMENT
CRIMINAL RECORDS SECTION
1 POLICE PLAZA, RM 300
NEW YORK, NY 10038

BRIEFLY DESCRIBE MANNER OF CRIME / LOSS OF PROPERTY

Harassment / Residence

Complainant states that while complainant was coming down from the fourth floor person landlord son did stopped complainant blocking him causing annoyance and alarm stated to complainant that complainant can't check other floors in his building.

NEW YORK POLICE DEPARTMENT
CRIMINAL RECORDS SECTION
1 POLICE PLAZA, RM 300
NEW YORK, NY 10038

Alarm No.	Report verified by police, name and signature	Date
	P.A.A. HUANG	JAN 13 2016

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
NY City Police Dept
Criminal Records Section
(Verification Unit)
1 Police Plaza, Rm 300
NY, NY 10038

9590 9403 0573 5183 1642 71

2. Article Number *(Transfer from service label)*
7015 1730 0000 8257 0158

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible] C. Date of Delivery 12/1/15

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt