

**Cypress College**  
**Department of Campus Safety**  
**Public Safety Log**

DATE / TIME REPORTED	DATE / TIME OCCURRED	INCIDENT	CODE
02-08-20 / 02:00 pm	02-08-20 / 11:00 – 01:30 pm	Traffic Collision / Hit and Run	20002 CVC
<b>INCIDENT LOCATION</b>			
Parking Lot 5			
<b>INCIDENT SUMMARY:</b>			
A swapmeet customer reported damage to their vehicle. The driver of the striking vehicle failed to leave contact information.			
<b>DISPOSITION:</b> <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 # 20-032		Police Report NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> Report # 20-00385	Police Event #

DATE / TIME REPORTED	DATE / TIME OCCURRED	INCIDENT	CODE
02-08-20 / 01:00 pm	02-08-20 / Unknown Time	Traffic Collision / Hit and Run	20002 CVC
<b>INCIDENT LOCATION</b>			
Parking Lot 1			
<b>INCIDENT SUMMARY:</b>			
A swapmeet customer reported damage to their vehicle. The driver of the striking vehicle failed to leave contact information.			
<b>DISPOSITION:</b> <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 checked="" type="checkbox"/> YES <input type="checkbox"/> Report #		Police Report NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> Report #	Police Event #