

T.A.S.A.R. K-9
NON-CRIMINAL SEARCH REQUEST

FROM: _____

PHONE: _____ **FAX:** _____

SUBJECT: REQUEST FOR K-9 SEARCH MISSION:

1. JURISDICTION: _____

2. AGENCY CONDUCTING SEARCH: _____

3. OFFICER IN CHARGE AT SCENE: _____

4. DATE, TIME, AND LOCATION OF SEARCH: _____

5. PURPOSE OF SEARCH : _____

6. APPROXIMATE NUMBER OF EMERGENCY WORKERS TO BE USED, LISTED BY UNIT: _____

7. TRAINING BENEFIT RECEIVED BY EMERGENCY WORKERS THROUGH PARTICIPATION: _____

8. **I CERTIFY THAT ALL EMERGENCY WORKERS WILL BE UTILIZED WITHIN THE SCOPE OF THEIR NORMAL EMERGENCY WORKER ASSIGNMENTS.**

9. **I CERTIFY THAT THIS SEARCH DOES NOT INVOLVE THE SEARCH FOR, APPREHENSION, DETENTION, OR ARREST OF ANY PERSONS IN THE ACT OF COMMITTING OR IS SUSPECTED OF COMMITTING A CRIME.**

Printed name of approving official

Signature of approving official

Date

FOR T.A.S.A.R. APPROVING AUTHORITY

Printed name of approving official

Signature of approving official

Date

Circle One

Request for K-9 Search Mission Number :

Approved

Disapproved