



Lebanon County Department of Emergency Services

Wanted Person CLEAN/NCIC Entry Form

***Mandatory Field**

Wanted Person

Temporary Felon

Juvenile

Caution Indicator

* Date of Report	* Reporting Officer	* Police Department	* Incident Number

Caution / Medical Conditions	* Name	* Sex	* Race	* Height	* Weight	* Hair Color

* Offense Code	* Date of Warrant	* Extradition Limitations

Enter at least **ONE** of the following fields:

Date of Birth
FBI Number

Social Security Number
Miscellaneous Number

* Date of Birth	* Social Security Number	* FBI Number	* Miscellaneous Number

And/Or **ONE** of the following sets:

Operator's License Number **with** State & Year

License Plate Number **with** State, Year & Type

Vehicle Identification Number **with** Vehicle Year, Make, Model, Style & Color

* Operator License Number	* State	* Year	* License Plate Number	* State	* Year	* Type

* Vehicle Identification Number	* Year	* Make	Model	* Style	Color

Place of Birth	Ethnicity	Eye Color	Skin Tone	Scars, Marks, Tattoos (and other characteristics)

Original Offense Code	Warrant Number	State Identification Number

Miscellaneous

Upon completion, please fax the form to 717-708-9222

LCDES USE ONLY

LCDES OCA	Date Checked	Checked By	Date Entered	Entered By