



# Broomfield Police Department

7 DesCombes Drive Broomfield, CO 80020 303-438-6480

## INFORMATION FOR SERVICE

1. YOU MUST HAVE A PHYSICAL ADDRESS FOR SERVICE THAT IS IN THE CITY & COUNTY OF BROOMFIELD.
2. ALL FEES WILL BE PAID IN ADVANCE, IN ACCORDANCE WITH 30-1-116 C.R.S. Fees quoted are per person/per service, NOT per location or attempt. If service is not effected, a portion of the service fee will be refunded to you. Process may be returned after 3 unsuccessful service attempts.
3. Complete the following information: PLEASE PRINT CLEARLY!

NAME OF PARTIES TO BE SERVED: \_\_\_\_\_

DOB: \_\_\_\_\_ AGE: \_\_\_\_\_ SEX: \_\_\_\_\_ RACE: \_\_\_\_\_  
HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ EYES: \_\_\_\_\_ HAIR: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

EMPLOYER NAME & ADDRESS \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

Distinguishing Marks/other information \_\_\_\_\_

(i.e. beard, mustache, missing teeth, balding, cleft chin, earrings, glasses, bushy eyebrows, any scars, marks, tattoos, body piercing, or any other distinguishing marks)

<p>Will the DEFENDANT be abusive toward the officer: YES _____ NO _____ UNKNOWN _____</p> <p>Is the DEFENDANT aware you have a paper to serve: YES _____ NO _____ UNKNOWN _____</p> <p>Does the DEFENDANT have any weapons: YES _____ NO _____ TYPE _____</p> <p>Does the DEFENDANT have any arrest warrants: YES _____ NO _____ UNKNOWN _____</p> <p>Does the DEFENDANT use alcohol: YES _____ NO _____ UNKNOWN _____</p> <p>Does the DEFENDANT use drugs: YES _____ NO _____ UNKNOWN _____</p> <p>Vehicle Description: YEAR _____ MAKE _____ MODEL _____ COLOR _____ PLATE # _____</p> <p>*If this is a temporary or permanent restraining order, do you wish to be notified by phone once the order has been served? Yes _____ No _____</p> <p>Phone number to contact you _____</p>
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YOUR NAME \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

I understand that the Officer will attempt to effect service based on the information provided. All process served by the Broomfield Police Department is done in accordance with the applicable Colorado Court Rules.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_