Armored Robbery Questionnaire

Important Contacts:
- Victim Services – Nova Scotia Department of Justice: http://www.gov.ns.ca/just/victim_services/contact.asp
- Emergency phone number - 911
- Crime Stoppers - 1 (800) 222-8477 (tips line)
- Nova Scotia College of Pharmacists - (902) 422-8528

• Call police on 911 to report an armed robbery.
• Seal the crime scene immediately and stop trading.
• Physical evidence.
• Record the contact details of witnesses who are unable to await the arrival of the police.

NB: Please complete this form on your own and DO NOT discuss the incident with anyone else present. It is important to capture your recollection of events as accurately as possible.

Date of incident: ____________________________  Time of incident: __________ AM
PM
Business name: ________________________________________________________________
Business address: ______________________________________________________________
CCTV available: Yes  No

Your name: ____________________________  Your telephone number (work): ____________________________
Work position: ____________________________

You should ask any witnesses to wait until the police arrive. If they are unable to wait, record their contact details below:

WITNESS 1
Witness’s name: ____________________________  Telephone (work): ____________________________

WITNESS 2
Witness’s name: ____________________________  Telephone (work): ____________________________

WHAT HAPPENED? Describe the incident in as much detail as you can recall - where, why, when, who, how.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
**DESCRIPTION OF OFFENDER** - Don't guess - if you are unsure about any aspect leave blank.

<table>
<thead>
<tr>
<th>First offender:</th>
<th>Second offender:</th>
<th>Third offender:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
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<tr>
<td>Height</td>
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<tr>
<td>Build</td>
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<tr>
<td>Complexion</td>
<td></td>
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<tr>
<td>Disguise</td>
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<td>Facial Hair</td>
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<tr>
<td>Tattoos etc.</td>
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<tr>
<td>Glasses</td>
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<tr>
<td>Hat</td>
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<tr>
<td>Gloves</td>
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<td>Shirt</td>
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<td>Tie</td>
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<tr>
<td>Coat</td>
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<tr>
<td>Trousers</td>
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<tr>
<td>Shoes</td>
<td></td>
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<tr>
<td>Bag, etc.</td>
<td></td>
<td></td>
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<tr>
<td>Weapon</td>
<td></td>
<td></td>
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<tr>
<td>Other characteristics</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**DESCRIPTION OF VEHICLE**

<table>
<thead>
<tr>
<th>License plate number</th>
<th>Approximate year</th>
<th>Colour of vehicle</th>
<th>Direction of travel</th>
<th>Vehicle make</th>
<th>Number of occupants</th>
<th>Other distinctive features</th>
</tr>
</thead>
</table>

Please circle the image below that best describes the vehicle:

- **Car**
- **Sedan**
- **Suv**
- **Van**
- **Truck**
- **Motorcycle**

**DESCRIPTION OF WEAPON** - Please circle the image below that best describes the weapon:

- **LARGE CARVING KNIFE**
- **FLICK KNIFE**
- **BUTCHER'S KNIFE**
- **SCREWDRIVER**
- **SYRINGE**
- **LARGE AUTOMATIC PISTOL**
- **SMALL AUTOMATIC PISTOL**
- **SAWN-OFF BOLT ACTION RIFLE**
- **PUMP ACTION SAWN-OFF SHOTGUN**
- **LONG BARREL REVOLVER**
- **SNUB NOSE REVOLVER**
- **SAWN-OFF LEVER ACTION RIFLE**
- **AUTOMATIC SAWN-OFF SHOTGUN**
- **SINGLE SHOT SAWN-OFF SHOTGUN**