

# Savannah-Chatham Neighborhood Watch



## Chairperson's Packet

Savannah – Chatham Metropolitan Police Department  
Precinct 5 (Islands) Office of Crime Prevention  
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# NEIGHBORHOOD WATCH

## YOU AND NEIGHBORHOOD WATCH

NEIGHBORHOOD WATCH IS NEIGHBORS WORKING WITH NEIGHBORS AND THE POLICE TO PREVENT CRIME. THE NEIGHBORHOOD WATCH PROGRAM IS BASED ON THE CONCEPT OF PEOPLE LOOKING OUT FOR ONE ANOTHER AND TO SEND A MESSAGE TO POTENTIAL CRIMINALS THAT SOMEONE IS WATCHING EVERY MOVE THEY MAKE.

## HOW TO ORGANIZE A NEIGHBORHOOD WATCH

1. DEFINE THE AREA THAT WILL PARTICIPATE IN THE NEIGHBORHOOD WATCH PROGRAM. THE "NEIGHBORHOOD WATCH STREET INFORMATION" SHEET NEEDS TO HAVE THE STREET NAMES, BLOCK NUMBERS, NUMBER OF HOUSES ON THE BLOCK AND THE BLOCK CAPTAIN'S NAME ASSIGNED TO THE AREA.
2. SELECT A CHAIRPERSON AND BLOCK CAPTAINS. THE CHAIRPERSON WILL BE THE KEY CONTACT WITH THE COMMUNITY COORDINATOR AND THE CMPD'S CRIME PREVENTION UNIT. THE BLOCK CAPTAINS WILL ASSIST THE CHAIRPERSON WITH CIRCULATING INFORMATION TO THE COMMUNITY.
3. ORGANIZE A MEETING IN A HOME, CHURCH, COMMUNITY BUILDING OR SCHOOL AND INVITE EVERYBODY WHO WILL BE WITHIN THE BOUNDARIES OF THE NEIGHBORHOOD WATCH PROGRAM TO ATTEND. EVERYONE IS A POTENTIAL CRIME VICTIM SO ENCOURAGE EVERYONE TO ATTEND THE MEETING.
4. INVITE A CRIME PREVENTION OFFICER OF THE SAVANNAH-CHATHAM METRO POLICE DEPARTMENT TO THE MEETING BY CONTACTING YOUR LOCAL POLICE PRECINCT (912) 651-6676. THE OFFICER WILL EXPLAIN THE NEIGHBORHOOD WATCH PROGRAM, OFFER HOME SECURITY TIPS AND PROVIDE ADVICE ON REPORTING SUSPICIOUS ACTIVITIES AND CRIMES.
5. IN ORDER TO BECOME AN "ACTIVE" NEIGHBORHOOD WATCH PROGRAM YOU WILL NEED TO HAVE **25%** OF THE RESIDENTS, WITHIN THE DEFINED BOUNDARIES ACTIVELY PARTICIPATING IN THE PROGRAM. THOSE RESIDENTS PARTICIPATING IN THE PROGRAM NEED TO SIGN THE "PARTICIPATING MEMBERS OF THE NEIGHBORHOOD WATCH PROGRAM" ROOSTER TO SHOW THEIR SUPPORT.
6. ONCE ALL THE REQUIREMENTS HAVE BEEN MET AND THE NEIGHBORHOOD WATCH COORDINATOR HAS REVIEWED THE PAPERWORK A NEIGHBORHOOD WATCH SIGN WILL BE ISSUED. NEIGHBORHOOD WATCH SIGNS ARE ISSUED BASED ON THE NUMBER OF ENTRANCES TO THE COMMUNITY WITH A MAXIMUM OF THREE BEING ISSUED. ADDITIONAL NEIGHBORHOOD WATCH SIGNS CANNOT BE PURCHASED FROM THE SCMPD.
7. TO REMAIN AN "ACTIVE" NEIGHBORHOOD WATCH THE COMMUNITY MUST HAVE AT LEAST ONE NEIGHBORHOOD WATCH MEETING A YEAR WITH A SAVANNAH-CHATHAM POLICE OFFICER IN ATTENDANCE.
8. TO "RE-ACTIVATE" A NEIGHBORHOOD WATCH PROGRAM THAT HAS BECOME INACTIVE THE COMMUNITY MUST FOLLOW THE SAME STEPS REQUIRED TO START A NEW NEIGHBORHOOD WATCH PROGRAM.

## MAINTAINING AN ACTIVE NEIGHBORHOOD WATCH

TO INSURE THAT YOUR PROGRAM REMAINS ACTIVE AND INTEREST REMAINS STRONG, THE FOLLOWING SUGGESTIONS SHOULD BE IMPLEMENTED:

- IT IS RECOMMENDED THAT YOUR COMMUNITY SET UP AN ANNUAL UPDATE MEETING
- PLAN QUARTERLY COMMUNITY EVENTS (IE: BLOCK PARTY, POOL PARTY, KID'S DAY, COOKOUT, COMMUNITY YARD SALE AND ETC.)
- SEND OUT A NEWSLETTER (MONTHLY, BI-MONTHLY, QUARTERLY, OR YEARLY
- SET UP AN EMAIL OR TELEPHONE PHONE INFORMATION TREE
- PARTICIPATE IN NATIONAL NIGHT OUT, WHICH IS HELD THE FIRST TUESDAY OF AUGUST

## ACTIVE NEIGHBORHOOD WATCH

NEIGHBORHOOD WATCH PARTICIPANTS ARE THE EXTRA EYES AND EARS FOR REPORTING CRIME AND HELPING NEIGHBORS. THEY HELP BUILD PRIDE AND SERVE AS A CATALYST IN EFFORTS TO ADDRESS COMMUNITY CONCERNS AND SOLVE PROBLEMS. PARTICIPANTS ARE NOT ASKED TO BE VIGILANTES OR TO ASSUME THE ROLE OF THE POLICE.

## BEING A NOSY NEIGHBOR

1. IF YOU SEE AN ACTUAL CRIME BEING COMMITTED, A SUSPECTED CRIME OR THREATENING SITUATIONS, CALL **911**.
2. WATCH OUT FOR YOUR NEIGHBOR'S HOUSE WHEN THEY ARE AWAY. BECOME FAMILIAR WITH WHO BELONGS, WHO DOES NOT BELONG AND KNOW YOUR NEIGHBOR'S VEHICLES.
3. TELL A TRUSTED NEIGHBOR WHEN YOU'RE GOING TO BE AWAY SO THEY CAN WATCH YOUR HOUSE AND COLLECT YOUR MAIL.

## OPERATION ID

THE SAVANNAH-CHATHAM POLICE DEPARTMENT **STRONGLY** RECOMMENDS THAT YOU COMPLETE AN INVENTORY OF THE PROPERTY INSIDE YOUR HOME BY RECORDING THE SERIAL NUMBERS ON THOSE ITEMS. BE SURE TO KEEP YOUR RECORDS IN A SAFE PLACE AND CONTINUE TO UPDATE IT WHEN NEW ITEMS ARE PURCHASED.

ENGRAVING PERSONAL ITEMS IS ALSO RECOMMENDED. SOME BURGLARS WILL AVOID YOUR HOME IF THEY THINK THAT YOUR VALUABLES ARE MARKED. OFTEN MARKED ITEMS ARE MORE DIFFICULT FOR CRIMINALS TO SELL. A MORE IMPORTANT REASON TO MARK OR ENGRAVE YOUR PROPERTY, HOWEVER, IS THAT THESE ITEMS ARE MUCH MORE EASILY IDENTIFIED AND RETURNED TO YOU WHEN POLICE RECOVER THEM. WHEN ENGRAVING FOLLOW THESE TIPS:

USE YOUR DRIVER'S LICENSE NUMBER FOR ENGRAVING, AND PLACE A STAR (ASTERISK) AFTER THE LAST DIGIT. (FOR EXAMPLE, GADL 1234567\*) **DO NOT USE SOCIAL SECURITY NUMBERS!** MARK THE ITEMS IN A PROMINENT PLACE THAT CAN BE SEEN WITHOUT TAKING ANYTHING APART. KEEP A LIST OF ALL THE ENGRAVED ITEMS. KEEP THIS INFORMATION IN A LOCKED FIREPROOF BOX, IF AVAILABLE.

AS AN ADDED MEASURE OF PROTECTION; PHOTOGRAPH OR VIDEOTAPE ITEMS WHICH CANNOT BE EASILY ENGRAVED OR THAT WOULD AFFECT THE VALUE IF A MARK WERE PLACED ON IT (I.E. SILVER, JEWELRY, ETC.)

## CHAIRPERSON INFORMATION

COMMUNITY NAME: \_\_\_\_\_  
CHAIRPERSON'S NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: GA ZIP: \_\_\_\_\_  
HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

## START -UP MEETING INFORMATION (OFFICER TO FILL OUT)

DATE OF MEETING: \_\_\_\_\_ NUMBER OF ENTRANCES: \_\_\_\_\_  
NUMBER OF HOUSES IN COMMUNITY: \_\_\_\_\_  
NUMBER OF PARTICIPATING HOUSEHOLDS: \_\_\_\_\_  
PARTICIPATION PERCENTAGE: \_\_\_\_\_ %  
(# PARTICIPATING / # HOUSES)

OFFICER'S NAME: \_\_\_\_\_ CODE #: \_\_\_\_\_  
DIVISION NUMBER: \_\_\_\_\_ RESPONSE AREA: \_\_\_\_\_  
NUMBER OF SIGNS POSTED: \_\_\_\_\_

\* NOTE - ONLY ONE SIGNATURE PER HOUSEHOLD REQUIRED \*





NEIGHBORHOOD WATCH  
BLOCK MAP

Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____		Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____
Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____		Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____
Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____		Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____
Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____	<b><u>STREET NAME</u></b>	Name: _____ Address: _____ Home Phone: _____ Work Phone: _____ Cell Phone: _____
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STREET NAME

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Address: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_

# NEIGHBORHOOD WATCH TELEPHONE TREE

**Chairperson:**  
\_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Block Captain:**  
\_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Block Captain:**  
\_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 1 (under Block Captain 1):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 2 (under Block Captain 1):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 3 (under Block Captain 2):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 4 (under Block Captain 2):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 5 (under Block Captain 1):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 6 (under Block Captain 1):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 7 (under Block Captain 2):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 8 (under Block Captain 2):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 9 (under Block Captain 1):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 10 (under Block Captain 1):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 11 (under Block Captain 2):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

**Member 12 (under Block Captain 2):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
\_\_\_\_\_

## NEIGHBORHOOD WATCH MEETING ANNOUNCEMENT

ON: \_\_\_\_\_ AT: \_\_\_\_\_ THERE WILL BE A MEETING TO ORGANIZE A NEIGHBORHOOD WATCH PROGRAM IN OUR COMMUNITY. \_\_\_\_\_ OF THE SAVANNAH-CHATHAM POLICE DEPARTMENT WILL DISCUSS WHAT WE CAN DO TO PROTECT OURSELVES AND HELP MAKE OUR COMMUNITY A SAFER PLACE FOR ALL OF US TO LIVE.

THE MEETING WILL BE HELD AT: \_\_\_\_\_



### *WHY YOU SHOULD PARTICIPATE*

VOICE AND ADDRESS YOUR CONCERNS  
REDUCE CRIME IN YOUR COMMUNITY  
PROVIDE A SAFER NEIGHBORHOOD FOR YOU AND YOUR FAMILY



# SUSPICIOUS CRIME / ACTIVITY REPORT

WAS THIS A (CHECK ONE)      **CRIME**    **SUSPICIOUS ACTIVITY**

**BRIEFLY DESCRIBE WHAT HAPPENED:**

\_\_\_\_\_

**WHEN AND WHERE DID IT HAPPEN?**    **DATE:** \_\_\_\_\_    **TIME:** \_\_\_\_\_

**COMMUNITY NAME:** \_\_\_\_\_

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

## SUSPECT DESCRIPTION:

SEX (CHECK ONE)    **MALE**    **FEMALE**

**AGE:** \_\_\_\_\_    **HEIGHT:** \_\_\_\_\_    **WEIGHT:** \_\_\_\_\_    **RACE:** \_\_\_\_\_

**HAIR COLOR:** \_\_\_\_\_    **HAIR STYLE:** \_\_\_\_\_

**FACIAL HAIR:** \_\_\_\_\_    **TEETH:** \_\_\_\_\_

**GLASSES:** \_\_\_\_\_    **EYE COLOR:** \_\_\_\_\_    **COMPLEXION:** \_\_\_\_\_

**TATTOOS, AMPUTATIONS, SCARS AND/OR DISTINGUISHING MARKS:**

\_\_\_\_\_

**NOTICEABLE ACCENTS OR SPECIAL CHARACTERISTICS OF SPEECH:**

\_\_\_\_\_

**NUMBER OF SUSPECTS:** \_\_\_\_\_    **STATEMENTS MADE BY SUSPECT:**

## CLOTHING:

**SHIRT:** \_\_\_\_\_    **PANTS:** \_\_\_\_\_    **COAT:** \_\_\_\_\_

**SHOES:** \_\_\_\_\_    **HAT:** \_\_\_\_\_

**JEWELRY:** \_\_\_\_\_

## WEAPON:

**TYPE:** \_\_\_\_\_    **COLOR:** \_\_\_\_\_

## VEHICLE DESCRIPTION:

**MAKE:** \_\_\_\_\_    **MODEL:** \_\_\_\_\_    **COLOR:** \_\_\_\_\_    **YEAR:** \_\_\_\_\_

**LICENSE PLATE:** \_\_\_\_\_    **STATE:** \_\_\_\_\_

**DENTS, SCRATCHES, MARKINGS, DECALS:** \_\_\_\_\_

**DIRECTION OF TRAVEL:** \_\_\_\_\_

## WITNESSES:

**NAME:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

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

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