

GRAFFITI REPORT

Please complete this form to report graffiti within the City of Port Coquitlam. This form will be forwarded to the City's Graffiti Committee and Bike Squad, who respond to complaints in the order they are received.

COMPLAINANT

Name: _____

Address: _____

Phone: _____

GRAFFITI DETAILS

Location: _____

Date of Incident
(if known): _____

Time of Incident
(if known): _____

Description: Gender Bias General Blight Profanity
 Racial Other (provide details below)

Materials Used: Etching Marker Spray Paint
 Other (provide details below)

Colours: _____

Comments/Additional Details (e.g. description/wording):

Please submit your completed form to:

Port Coquitlam Community Police Station
2581 Mary Hill Road
Port Coquitlam BC V3C 2A8

Fax 604.927.2399
Email communitypolice2@shaw.ca

