

APOWW

PEACE OFFICER APPLICATION FOR EMERGENCY DETENTION WITHOUT WARRANT

(Pursuant to Texas Mental Health Code: Chapter 573, Subchapter A, Section 001)

OFFICERS PLEASE PRINT ALL INFORMATION

Pursuant to the Texas State Mental Health Code, the applicant _____
Name and ID Number

A Peace Officer with the _____ makes this application for the emergency
Name of Department

detention of _____
LAST NAME FIRST NAME RACE SEX

_____ who was apprehended on the _____ day of _____, 20____
DOB SS#

at _____ AM/PM at _____
ADDRESS OF APPREHENSION

Emergency detention is sought for the following reasons:

- (1) I believe there is not sufficient time to obtain a warrant before taking the person into custody;
- (2) I have reason to believe and do believe that the person evidences mental illness;
- (3) I have reason to believe and do believe that the person evidences a substantial risk of serious harm;
- (4) I have reason to believe that the risk of harm is imminent unless the person is immediately restrained;
- (5) My above stated beliefs are based on the following specific recent behavior, overt acts, attempts or threats:

Specify and describe behavior, overt acts, attempts or threats and the risk of harm the person presents

Which were observed by me and/or reliably reported to me by _____
NAME OF PERSON

Who is related unrelated to the person as follows _____
Observing person's relationship/affiliation

Executed on this the _____ day of _____, 20____, at _____, Texas
City County

Signature of Peace Officer, Jurisdiction

MEDICAL INFORMATION: Please provide any medical history or medical information regarding the person you have detained:

HIV HBV/HCV TB Diabetes Blood Pressure Seizures Pregnancy

DTs or any other physical conditions or injuries: _____
