

# "HOT SPOT" DESIGNATION APPLICATION

DATE: \_\_\_\_\_

BUREAU OF PATROL  
CHICAGO POLICE DEPARTMENT

DISTRICT: \_\_\_\_\_

PRIORITY # - \_\_\_\_\_ OF \_\_\_\_\_

Recommended  
Time Period for: \_\_\_\_\_ to: \_\_\_\_\_ (Day / Mon / Year)  
District "Hot Spot" Locations expire after a 6 month period.

SUBMITTED FOR APPROVAL AS:  GANG  NARCOTICS  BOTH

Is this a renewal for a currently active location?  YES Include number of dispersals and number of persons dispersed in the binder.  
 NO

"Hot Spot" Boundaries:  
North: \_\_\_\_\_  
East: \_\_\_\_\_  
South: \_\_\_\_\_  
West: \_\_\_\_\_  
Affected Beat(s): \_\_\_\_\_

**Note:** a map with the above area highlighted must be submitted as page 4 of this application.

GANG(S) IDENTIFIED - 1. \_\_\_\_\_ 2. \_\_\_\_\_

**The package submitted identifying the above described area as a "Hot Spot" includes the following documentation:**

### A- ANALYSIS OF CRIME

Incident data  Arrest data  Calls For Service  CLEAR Web Maps  Charts/Graphs

What distinguishes this area from other areas nearby or elsewhere within the district? **(Must complete this section)**

### B - SPECIFIC PATTERNS (as related by Police personnel):

<input type="checkbox"/> Gang Graffiti	<input type="checkbox"/> "Flashing" gang signs	<u>Neighbors not using:</u>
<input type="checkbox"/> Shots Fired	<input type="checkbox"/> Fights on street	<input type="checkbox"/> Parks
<input type="checkbox"/> Disturbance call	<input type="checkbox"/> Underage drinking	<input type="checkbox"/> School yards
<input type="checkbox"/> Large groups gathering	<input type="checkbox"/> Street Robberies/Thefts	<input type="checkbox"/> Other
<input type="checkbox"/> Community Alerts	<input type="checkbox"/> Crime Patterns	<input type="checkbox"/> _____

Explain: \_\_\_\_\_

### For Narcotics-Related Loitering:

<input type="checkbox"/> Heavy vehicular traffic	<input type="checkbox"/> Heavy foot traffic	<input type="checkbox"/> "Stream" of visitors
<input type="checkbox"/> "Hawkers"	<input type="checkbox"/> Look-outs	<input type="checkbox"/> Hand-to-hand transactions

### C- DESCRIPTIVE INFORMATION: The above described area is or near:

<input type="checkbox"/> Elementary school	<input type="checkbox"/> High School	<input type="checkbox"/> CHA building	<input type="checkbox"/> Senior building
<input type="checkbox"/> Public park	<input type="checkbox"/> Shopping mall	<input type="checkbox"/> Business district	<input type="checkbox"/> Tavern
<input type="checkbox"/> Open/vacant building	<input type="checkbox"/> Liquor store	<input type="checkbox"/> Transportation center	

Other \_\_\_\_\_  
Explain: \_\_\_\_\_

### D- COMMUNITY INPUT:

Is there a description in the "package" from an identifiable source relating how gang activity has impacted the area's quality of life?

Elected officials  Community groups  Beat meetings  Community concerns  
 Newspaper articles  Letters/emails from citizens  Other \_\_\_\_\_

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## Enforcement Area Recommendation

This format will be used by District Commanders to recommend a geographically specified area within their district to be designated as an "Enforcement Area" pursuant to "Gang Loitering" Section 8-4-015 (MCC), "Narcotics-Related Loitering" Section 8-4-017 (MCC) and S10-02-02.

Recommended Enforcement Area For:  Gang Loitering  Narcotics- Related Loitering  Both

**1. Describe the specific boundaries of the recommended enforcement area and attach appropriate Beat map(s), with the enforcement area shaded in.**

North Boundary: \_\_\_\_\_

East Boundary: \_\_\_\_\_

South Boundary: \_\_\_\_\_

West Boundary: \_\_\_\_\_

**2. Describe the enforcement area including, at a minimum, the following: (incidents, arrests, calls for service, dispersals, number of persons dispersed, ISR, etc. all within the required location only).**

**A. Analysis of crime -**

**B. Input from district personnel and specialized units concerning specific patterns - (identified in Section B, Page 1)**

**C. Other descriptive information - (identified in Section C, Page 1)**

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D. Personal Observation - (Gang Faction, Gang Conflicts, etc.)

E. Input from community members, local community-based organizations and elected officials - (identified in Section D, Page 1)

\_\_\_\_\_  
Commander District

**REVIEWED AND APPROVED:**

\_\_\_\_\_  
Area Deputy Chief, Bureau of Patrol (Area)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chief, Bureau of Patrol

\_\_\_\_\_  
Date

\_\_\_\_\_  
First Deputy Superintendent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent of Police

\_\_\_\_\_  
Date

**NOTE FOR BUREAU OF PATROL ENTRY ONLY**

Enforcement Area Recommendation # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
YEAR DISTRICT QUARTER ENFORCEMENT AREA