

**WATERTOWN POLICE DEPARTMENT**

119 South Maple Street  
Watertown, South Dakota 57201-3653  
**OPERATIONS PLAN**

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**Case Number:** \_\_\_\_\_

**Lead Officer:** \_\_\_\_\_ **Contact Number(s):** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_ **Contact Number(s):** \_\_\_\_\_

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**Violations/Charges:** \_\_\_\_\_

**Date and Time of Operation:** \_\_\_\_\_

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**LOCATION OF OPERATION**

**Briefing Location:** \_\_\_\_\_

**Staging Location:** \_\_\_\_\_

**Target Location:** \_\_\_\_\_

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**OPERATION TYPE**

- |  |  |
|--|--|
| <input type="checkbox"/> <b>Controlled Delivery</b>      | <input type="checkbox"/> <b>Surveillance</b> |
| <input type="checkbox"/> <b>Search Warrant Execution</b> | <input type="checkbox"/> <b>U/C Meeting</b>  |
| <input type="checkbox"/> <b>Arrest Warrant Execution</b> | <input type="checkbox"/> <b>Other:</b> _____ |
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**REVIEW OF SEARCH WARRANT**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Lead Officer:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

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**VERIFICATION OF SEARCH WARRANT LOCATION**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Lead Officer:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

Type of Premises: \_\_\_\_\_

Description of Premises: \_\_\_\_\_

Conveyance Type: \_\_\_\_\_

Type and Quantity of Contraband Involved: \_\_\_\_\_

\_\_\_\_\_

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SUMMARY OF INVESTIGATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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OPERATIONAL OBJECTIVES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Prisoner Processing Location: \_\_\_\_\_

Evidence To Be Transported: \_\_\_\_\_

Equipment Required: \_\_\_\_\_

Hazards: \_\_\_\_\_

Occupant Information: (Number of) \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ Children

Fortification, Security Doors, Security Windows: [ ] Yes [ ] No

If Yes Description: \_\_\_\_\_

Weapons: [ ] Yes [ ] No [ ] Unknown Type/Location: \_\_\_\_\_

Explosives: [ ] Yes [ ] No [ ] Unknown Type/Location: \_\_\_\_\_

Dogs: [ ] Yes [ ] No [ ] Unknown Type/Location: \_\_\_\_\_

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**OFFICERS IDENTIFIED BY:**

[ ] Raid Jackets [ ] Wrist Bands [ ] Displayed Badges

[ ] Police Ball Caps [ ] Uniformed Officers

[ ] Other: \_\_\_\_\_

**SUSPECT INFORMATION: (Attach additional information if more than one suspect)**

**Name of Suspect:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Address of Suspect:** \_\_\_\_\_

**Physical Description:** \_\_\_\_\_

**Vehicle(s):** \_\_\_\_\_

**History of Violence or Weapons:** \_\_\_\_\_

**Prior Criminal History:** \_\_\_\_\_

US Citizen     Non US Citizen

**Immigration Status and A-Number (If Known):** \_\_\_\_\_

**Other Pertinent Information:** \_\_\_\_\_

**Photograph Available:**     Yes     No

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**UNDERCOVER AGENT: (Attach additional information if more than one U/C)**

**Is U/C:**

CI                                     Cooperating Defendant                     DCI Agent

Other L.E.                             Other: \_\_\_\_\_

**Name of U/C:** \_\_\_\_\_

**Physical Description:** \_\_\_\_\_

**Pager / Cellular Phone Number(s):** \_\_\_\_\_

**U/C Vehicle:** \_\_\_\_\_

**Distress Code:**                    **Audio:** \_\_\_\_\_                    **Visual:** \_\_\_\_\_

**Arrest Signal:**                    **Audio:** \_\_\_\_\_                    **Visual:** \_\_\_\_\_

**Radio Channels:**                    **Primary:** \_\_\_\_\_                    **Secondary:** \_\_\_\_\_

**Mobile Phone Numbers:** \_\_\_\_\_

**Nearest Hospital:** \_\_\_\_\_

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**PERSONNEL ASSIGNMENTS:**

**I - Interviewer**

**A – Arrest Team**

**C – Cover Team**

**P – Perimeter Security**

**S – Surveillance**

**ET – Entry Team**

**BR - Breacher**

**M – Medic**

**PH - Photographs**

**ST – Search Team**

**EV – Evidence Collection**

**CS – Counter Surveillance**

**PT – Prisoner Transport**

**SV – Surveillance Van**

**TL – Team Leader**

**AS – Air Support**

**NAME:**

**CALL SIGN:**

**ASSIGNMENT(S):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_

**REPORT ASSIGNMENTS:**

**NAME:**

**ASSIGNMENT(S):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**Attachments:**

Risk Assessment Matrix     Diagram of Location     Other: \_\_\_\_\_

\_\_\_\_\_  
**Supervisor Approval (If Required)**

\_\_\_\_\_  
**Date**

**DIAGRAM**

**In detail the location of warrant service below. The exterior should include all doors, windows, detached garages and outbuildings. The interior should include furniture placement and the location of any known weapons or explosives. Use separate forms for the interior and exterior of the structure. If photographs are available they may be used in place of diagrams. Exterior photos should be attached in most cases.**

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**Diagram Prepared by:** \_\_\_\_\_