

**CALIFORNIA BOARD OF STATE AND COMMUNITY CORRECTIONS  
ANNUAL SURVEY OF LAW ENFORCEMENT FACILITIES – CALENDAR YEAR 2018**

*\*Please see Monitoring Authority on reverse side\**

**THIS IS A REQUIRED SUBMISSION DUE FEBRUARY 28, 2018**

**SECTION I. Facility Identification**

Agency Name:		Date:	
Facility Name:			
Facility Street Address:			
City:	Zip:	County:	

**SECTION II. Facility Operation**

<b>Adult Detention</b>	1. Will ADULTS be <b>securely</b> held in this facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	<b>If YES, check ALL that apply:</b>		
	<input type="checkbox"/> Locked Room <input type="checkbox"/> Cell <input type="checkbox"/> Cuffing Fixture <input type="checkbox"/> Other, explain _____		

<b>Juvenile Detention</b>	2. Will JUVENILES be held in this facility?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	<b>If YES, check ALL that apply:</b>		
	<input type="checkbox"/> Locked Room <input type="checkbox"/> Cell <input type="checkbox"/> Cuffing Fixture <input type="checkbox"/> Nonsecure <input type="checkbox"/> Other, explain _____		

<b>Certification</b>	<b>If YES to Questions 1 AND 2 above (shaded areas), AND adults in detention are held in 1) Locked Room, 2) Cell, and/or 3) an area within secure perimeter, <u>you must submit the Monthly Report on the Detention of Minors – Calendar Year 2018</u> each month AND check the box below.</b>	
	<input type="checkbox"/>	<b>By checking this box, the sheriff or chief of police certifies</b> that the facility is in conformity with the regulations adopted by the Board of State and Community Corrections under WIC §210.2(a). <i>(California Code of Regulations, Title 15, Article 9, Minors in Temporary Custody in a Law Enforcement Facility.)</i>

**SECTION III. Contact Information**

Name <u>and</u> Title of Reporting Person	Phone:	Date:
	E-Mail:	
Name <u>and</u> Title of Facility Administrator	Phone:	Date:
	E-Mail:	

Submit completed form **by email:** [analyst@bscc.ca.gov](mailto:analyst@bscc.ca.gov)  
**by fax:** (916) 322-2461  
**by mail:** Board of State and Community Corrections  
 ATTN: Compliance Monitor Analyst  
 2590 Venture Oaks Way, Ste. 200  
 Sacramento, CA 95833

**Questions?** [analyst@bscc.ca.gov](mailto:analyst@bscc.ca.gov) or (916) 323-8621

This form may be downloaded at: [http://www.bscc.ca.gov/s\\_fsoservices/](http://www.bscc.ca.gov/s_fsoservices/)  
 under the *Youth in Adult Detention Facilities* button.