



# Essex County Sheriff's Department



## Civil Process Division

P.O. Box 2019  
35 Congress Street, Suite 2100A  
Salem, MA 01970

Kevin F. Coppinger  
Sheriff  
Kerri L. Patterson  
Assistant Superintendent

Telephone 978-750-1900  
ext. 3590  
Fax 978-741-2585

### CAPIAS ARREST FORM

To request a physical arrest on a capias please submit this form along with your original capias. Please provide as much of the following information as you are able. Please use the additional information section to provide any other information you believe may be of assistance. If applicable, please provide a photograph of the defendant.

#### PLAINTIFF/ATTORNEY INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number (required\*): \_\_\_\_\_

Email: \_\_\_\_\_

#### DEFENDANT INFORMATION

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_ Heigh: \_\_\_\_\_ Weight: \_\_\_\_\_

Alias (if applicable): \_\_\_\_\_

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*Proudly serving the communities of Essex County*

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SAUGUS • SWAMPSCOTT • TOPSFIELD • WENHAM • WEST NEWBURY



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### DEFENDANT CONTACT INFORMATION

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Alternate Addresses (if applicable):

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

### Vehicles:

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Reg. No.: \_\_\_\_\_ Color: \_\_\_\_\_

Company Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**BALANCE OWED:** \_\_\_\_\_

### ADDITIONAL INFORMATION

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