Dear Upper Providence Township Resident,

As Chief of Police for Upper Providence Township, I would like to take this opportunity to introduce you to a terrific program to assist endangered individuals who may be lost or separated from their loved ones.

The members of the Upper Providence Police Department have worked together to create project L.O.C.A.T.E., which stands for Law Officers Concerned About The Endangered. The program is headed up by Officer Scott W. Reynolds. Its focus is on individuals within the community who have special needs. Autistic, dementia afflicted, and other mentally challenged persons can be registered within the Upper Providence Township Police Department. Their personal identifiers as to appearance, affliction and habits are catalogued so that an officer responding to a found person or missing person complaint can reunite the individual back with family or care providers. The Officer, through the department’s mobile data record management system, can access the information quickly and produce a picture of the individual from the file for purpose of identification.

If you are a care provider for an individual with special needs who has a propensity to become lost or disoriented, please take advantage of this program. The police department can respond to your needs more quickly and efficiently because of this valuable information provided to us before a tragic situation occurs.

Thank you for your interest and anticipated support of this program. Should you have any questions concerning the operation of L.O.C.A.T.E., please contact Officer Reynolds or myself at 610-933-7899.

Very Truly Yours,
Chief Mark A. Toomey

Law Officers Concerned About The Endangered

To register with the L.O.C.A.T.E. program, a parent, guardian or concerned associate should fill out the registration form in this brochure and return it along with a current photograph of the person to the Upper Providence Township Police Department. The information will then be placed into the police department’s database for identification purposes should the police come into contact with the person with special needs.

A copy of the L.O.C.A.T.E. form is attached to this brochure. It can also be obtained at the Upper Providence Township Police Department.

Upper Providence Township Police Department
1286 Blackrock Road, PO Box 406
Oaks, PA 19456
610-933-7899
L.O.C.A.T.E.

Law Officers Concerned About The Endangered

The Upper Providence Township Police Department under the direction of Chief Mark A. Toomey has initiated the L.O.C.A.T.E. program. The L.O.C.A.T.E. program was originally created by Officers in Hatfield Township Montgomery County. The purpose of the program is to gather information on citizens living in Upper Providence Township who may wander away from their residence and have difficulty communicating with Police Officers. The information gathered will assist in reuniting the person with loved ones.

L.O.C.A.T.E. will focus on those citizens with special needs such as:

- Autism
- Down Syndrome
- Hearing impaired
- Alzheimers and related Dementia Disorders
- Language barriers

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Registration Form

Upper Providence Township Police Department
1286 Blackrock Road, PO Box 406, Oaks, PA 19456
Office: (610) 933-7900 • Fax: 610-983-0370

Name of individual with special needs: ________________________________

Their address: ______________________________________________________

Current physical description: _________________________________________

Race: ___________________ Sex: _______ Date of Birth: ____________

Height: _______ Weight: _______ Eye Color: _______ Age: _______

Hair Color: _______________________________________________________

Nickname: _______________________________________________________

Scars/Marks/Tattoos/Other identifying features: _______________________

Any significant medical/psychological conditions: ______________________

Doctor/Psychiatrist/Others Mental or Medical Professionals, currently being seen: _____________________________

Name of parent or care providers: __________________________________

Their address: ___________________________________________________

Phone: __________________________ Phone: _________________________

Alternative emergency contact: ______________________________________

Phone: __________________________ Phone: _________________________

Is he or she likely to wander off? ____________________________________

Favorite attractions or places they may be found: ______________________

Atypical behaviors or characteristics that may attract attention: _______

Favorite toy, object, animal or discussion topic including likes or dislike: _____________________________________

Approaching, coming, or de-escalating technique most likely to work: ______________________________________

Method of communication, if non-verbal, sign language, picture board, written words: _____________________

ID Information: Do they carry or wear jewelry, tags or any other pertinent information you would like to provide: ____________________________


