

Notification -- Emergency Detention      **NO.** \_\_\_\_\_

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

**THE STATE OF TEXAS  
FOR THE BEST INTEREST AND PROTECTION OF:**

\_\_\_\_\_

**NOTIFICATION OF EMERGENCY DETENTION**

Now comes \_\_\_\_\_, a peace officer with (name of agency) \_\_\_\_\_  
\_\_\_\_\_, of the State of Texas, and states as follows:

1. I have reason to believe and do believe that (name of person to be detained)  
\_\_\_\_\_ evidences mental illness.

2. I have reason to believe and do believe that the above-named person evidences a substantial risk of serious harm to  
himself/herself or others based upon the following:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I have reason to believe and do believe that the above risk of harm is imminent unless the above-named person is  
immediately restrained.

4. My beliefs are based upon the following recent behavior, overt acts, attempts, statements, or threats observed by me or  
reliably reported to me:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. The names, addresses, and relationship to the above-named person of those persons who reported or observed recent  
behavior, acts, attempts, statements, or threats of the above-named person are (if applicable):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For the above reasons, I present this notification to seek temporary admission to the (name of facility)  
\_\_\_\_\_ inpatient mental health facility or hospital facility for the detention of (name of person to be  
detained) \_\_\_\_\_ on an emergency basis.

6. Was the person restrained in any way? Yes  No

\_\_\_\_\_ BADGE NO. \_\_\_\_\_  
PEACE OFFICER'S SIGNATURE

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_

A mental health facility or hospital emergency department may not require a peace officer to execute any form other than this  
form as a predicate to accepting for temporary admission a person detained under Section 573.001, Texas Health and Safety  
Code.