Erie County Jail
Inmate Observation Log

Date: _____

Name of Person Being Observed:_____

Authority Recommending Observation: _____

Reason for Observation:_____

An officer or corporal of the Erie County Sheriff's Office – Jail Division shall observe the above-mentioned inmate every _10_ minutes. Time of observation, signature of the officer, and the inmate's condition shall be recorded below.

Observations

Time	*Signature of Officer*	*Inmate's Condition*

If the inmate requires to be restrained longer than 2 hours due to being a threat to themselves or others, the Shift Supervisor must document the reasons in a Jail Incident Report. If possible inmate should be checked by Medical Staff.