RULE 4.2
AUTHORIZATION FOR APPREHENSION AND DETENTION

At the time of taking any person into custody for failure to adhere to the terms and conditions of release under RCW 71.05.340 or of an alternative treatment under RCW 71.05.320, an authorization for apprehension and detention shall be served upon the person. The authorization for apprehension and detention shall include:

(a) The name of the person taken into custody;

(b) A statement that it is issued pursuant to the suspension of conditional release or alternative treatment;

(c) The date on which the order of commitment or order for alternative treatment was entered and the number of days, if any, for which the person was ordered committed.

(d) The authorization shall be in substantially the following form:

TO: ANY PEACE OFFICER OR MENTAL HEALTH PROFESSIONAL

You are authorized to take or cause to be taken (name of person) into custody and place such person in (name and location of evaluation and treatment facility) for detention pursuant to ___ RCW 71.05.340 (suspension of conditional release) or ___ RCW 71.05.320 (suspension of alternative treatment). The named person was ___ conditionally released from an order of commitment or ___ originally placed on alternative treatment, the conditions of which have been violated. The named person's commitment to inpatient treatment or alternative treatment was originally ordered for (number) days by (name of court) on (date).

Date: _____ (signed) _____

___ Secretary, Department of Social and Health Services, State of Washington, or His Designee,

___ Mental Health Professional

(name) County, Washington