

INTERNAL AFFAIRS SUMMARY REPORT

Agency: Monmouth Beach

County: Monmouth

Reporting Period: ☐ 1st Quarter (Jan.-Mar.) ☐ 3rd Quarter (July-Sept.) ☒ Annual
☐ 2nd Quarter (Apr.-June) ☐ 4th Quarter (Oct.-Dec.) (End-of-Year)

Type of Complaint	Anonymous Complaints	Citizen Complaints	Agency Complaints	Total Complaints	Sustained	Exonerated	Not Sustained	Unfounded	Administratively Closed	Total Dispositions	Pending Investigations
Excessive Force											
Improper Arrest											
Improper Entry											
Improper Search											
Other Criminal Violation											
Differential Treatment											
Demearor	1			1			1				
Domestic Violence											
Other Rule Violation *	1			1			1				
Total	2	0	0	2	0	0	2	0	0	2	0

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

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Excessive Force											
Improper Arrest											
Improper Entry											
Improper Search											
Other Criminal Violation											
Differential Treatment											
Demeanor											
Domestic Violence											
Other Rule Violation *	1						1				
Total	1	0	0	1	0	0	1	0	0	1	0

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Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

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Improper Arrest											
Improper Entry											
Improper Search											
Other Criminal Violation											
Differential Treatment											
Demearor											
Domestic Violence											
Other Rule Violation *	0						0			1	0
Total	0	0	0	0	0	0	0	0	0	1	0

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Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

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Improper Arrest											
Improper Entry											
Improper Search											
Other Criminal Violation											
Differential Treatment											
Deemeanor											
Domestic Violence											
Other Rule Violation *											
Total	0	0	0	0	0	0	0	0	0	0	0

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

INTERNAL AFFAIRS SUMMARY REPORT

Agency: Monmouth Beach Police

County: Monmouth

Reporting Period:

☐ 1st Quarter (Jan.-Mar.)
☒ 2nd Quarter (Apr.-June)

☐ 3rd Quarter (July-Sept.) ☐ Annual
☒ 4th Quarter (Oct.-Dec.) (End-of-Year)

Type of Complaint	Anonymous Complaints	Citizen Complaints	Agency Complaints	Total Complaints	Sustained	Exonerated	Not Sustained	Unfounded	Administratively Closed	Total Dispositions	Pending Investigations
Excessive Force											
Improper Arrest											
Improper Entry											
Improper Search											
Other Criminal Violation											
Differential Treatment											
Deemeanor	1										
Domestic Violence											
Other Rule Violation *											
Total	1	0	0	1	0	0	1	0	0	1	0

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court				
Superior Court				
Total	0	0	0	0

MONMOUTH BEACH POLICE DEPARTMENT



14 Willow Avenue
Monmouth Beach, NJ 07750
1-732-229-1313



Thomas C. Walsh
Chief of Police

Public Synopsis of Disciplinary Actions for Internal Affairs for 2018

IA CASE	QUARTER	HOW REPORTED	COMPLAINT TYPE	DISPOSITION
2018IA01	1	Anonymous	Other Rules Violation	Not Sustained
2018IA02	4	Anonymous	Demeanor	Not Sustained



Monmouth County Police Pursuit Report

Agency: Monmouth Beach Police

Reporting Period : 2018

Person Completing Report: Lt. McManus

Telephone Number: 732-229-1313

Date Completed: 01/01/2019

1. Number of pursuits initiated	0
2. Number of pursuits resulting in accidents	0
3. Number of pursuits resulting in injury (NO DEATHS)	0
4. Number of pursuits resulting in death	0
5. Number of pursuits resulting in arrest	0
6. Number of vehicles in accidents	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
7. Number of people injured	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
8. Number of people killed	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
9. Number of people arrested	0
10. Number of pursuits in which a tire deflation device was used	0
11. I certify that every police officer employed by this agency received in-service vehicular pursuit training twice this year in compliance with The Attorney General's & the Monmouth County Prosecutor's Office Vehicular Pursuit policies.	☒

Do not type into dark shaded areas of the form.

USE OF FORCE REPORT

Sea Bright — 185B03601

Manmouth Beach — 18MB04863

.. Incident Information

Date <u>7/19/18</u>	Time <u>20:14</u>	Day of Week <u>Thursday</u>	Location <u>Ocean Ave, Marius Ln, Sea Bright</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>Disorderly</u>) ☐ Other Dispute		Type of Person: ☒ Under the Influence ☐ Other Unusual Condition (Specify _____)	

[Check only if unusual condition in person exists]

B. Suspect(s) Information (only those persons who were subjects of police use of force)

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>[Signature]</u>	<u>Y/N</u>	<u>Disorderly Conduct</u>	<u>M</u>	<u>W</u>	<u>27</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	☒		
...physical threat/attack on Police Officer			
...threatened/attacked Police Officer with blunt object			
...threatened/attacked Police Officer with knife/cutting object			
...threatened/attacked Police Officer with motor vehicle			
...threatened Police Officer with firearm			
...fired at Police Officer			
...Other (Specify _____)			

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Godwin, Jeffrey, T</u>	<u>3318</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>LT. DANIEL McMANUS</u>			Supervisor Signature: <u>[Signature]</u> 16		

USE OF FORCE REPORT

.. Incident Information

Date <u>1/19/2018</u>	Time <u>22:42</u>	Day of Week <u>FRIDAY</u>	Location <u>25 MEADOW UNIT 66</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>PSYCH SCREEN</u>) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☒ Other Unusual Condition (Specify <u>PSYCH / SUICIDAL</u>)

[Check only if unusual condition in person exists]

B. Suspect(s) Information (only those persons who were subjects of police use of force)

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>[REDACTED]</u>	Y/N		<u>F</u>	<u>W</u>	<u>20</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	<u>✓</u>		
...physical threat/attack on Police Officer			
...threatened/attacked Police Officer with blunt object			
...threatened/attacked Police Officer with knife/cutting object			
...threatened/attacked Police Officer with motor vehicle			
...threatened Police Officer with firearm			
...fired at Police Officer			
...Other (Specify <u>P</u>)			

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>Protective</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Farmer, Peter J</u>	<u>21</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>LT. McMANUS</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date <u>1/19/18</u>	Time <u>22:42</u>	Day of Week <u>Friday</u>	Location <u>25 Meadow Ave #66</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>psych screen</u>) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☒ Other Unusual Condition (Specify <u>mental/suicidal</u>)

[Check only if unusual condition in person exists]

B. Suspect(s) Information (only those persons who were subjects of police use of force)

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>[redacted]</u>	<u>Y/N</u>		<u>F</u>	<u>C</u>	<u>20</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	<u>X</u>		
...physical threat/attack on Police Officer			
...threatened/attacked Police Officer with blunt object			
...threatened/attacked Police Officer with knife/cutting object			
...threatened/attacked Police Officer with motor vehicle			
...threatened Police Officer with firearm			
...fired at Police Officer			
...Other (Specify _____)			

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>tackled patient handcuffed</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Reichman, Peter J</u>	<u>20</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>patrol</u>		
Print Supervisor Name: <u>LT. McManus</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)