Monmouth County
Use of Force
Report

Agency: Spring Lake Heights Police Department

Reporting Period: Annual 2015 Report

Person Completing Report: Det. Michael Matunas

Telephone Number: (732) 449-6161

Date Completed: 01/14/2016

Total Number of Incidents which Necessitated The Use of Force		3
Total Number of Persons Against Whom Force Was Used		3
Total Number of Incidents Involving Officer Use of Physical Force	3	
Total Number of Incidents Involving Officer Use of Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Enhanced Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Deadly Force	0	
Total Number of Incidents Involving Officer Use of Physical Force & Mechanical Force	0	
Total Number of Incidents Involving Officer Use of Physical Force & Deadly Force	0	
Total Number of Incidents Involving Officer Use of Mechanical Force & Deadly Force	0	
Total Number of Incidents Involving Officer Use of Physical Force, Mechanical Force & Deadly Force	0	
Total Number of Incidents Involving Any Injury to a Person Resulting from the Use of a Firearm by a Law Enforcement Officer	0	

Do not type into dark shaded areas of the form.

Department of Police
Borough of Spring Lake Heights
555 Brighton Avenue
Spring Lake Heights, NJ 07762

Telephone (732) 449-6161
Fax (732) 449-3047

USE OF FORCE REPORT

INCIDENT NUMBER 15-0821

Date	Time	Day of Week	Location
03/01/2015	2330	Sunday	1907 Greve Avenue (Parking Lot)

Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call ☐ Other Dispute
Specify Intoxicated Male

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?	Suspect Injured?	Hospital?
Regan, Christopher M	Y ☒ N ☐	Disorderly/Resisting	Male	White	25	Y ☐ N ☒	Y ☐ N ☒	Y ☐ N ☒
	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	X		
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]

E. Officer Information

Name (Last, First. Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Gunnell, Edward W. (Sgt)	4919	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒

Signature: Sgt Ed Gunnell
Police Officer Assignment Patrol Sergeant
Print Supervisor Name: Chief David Petriken
Supervisor Signature: Chief David Petriken

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USE OF FORCE REPORT

INCIDENT NUMBER 15-0821

Date 03/01/2015	Time 2330	Day of Week Sunday	Location 1907 Greve Avenue (Parking Lot)

Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call ☐ Other Dispute
Specify Intoxicated Male

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?	Suspect Injured?	Hospital?
Regan, Christopher M	Y ☒ N ☐	Disorderly/Resisting	Male	White	25	Y ☐ N ☒	Y ☐ N ☒	Y ☐ N ☒
	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
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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)

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Ramp, Zachary	4926	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒

Signature: Z. R
Police Officer Assignment Patrol
Print Supervisor Name: Sgt. Edward W. Gunnell
Supervisor Signature: Sgt. Ed Gunnell

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USE OF FORCE REPORT

INCIDENT NUMBER 15-0821

Date	Time	Day of Week	Location
03/02/2015	0010	Monday	Spring Lake Heights Police Department

Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call ☒ Other Dispute
Specify Disorderly/Resisting

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?	Suspect injured?	Hospital?
Regan, Christopher M	Y ☒ N ☐	Disorderly/Resisting	Male	White	25	Y ☐ N ☒	Y ☒ N ☐	Y ☐ N ☒
	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

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Number of Hits ____
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E. Officer Information

Name (Last, First. Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Ramp, Zachary	4926	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒

Signature: [signature]
Police Officer Assignment Patrolman
Print Supervisor Name: Sgt. Edward W. Gunnell
Supervisor Signature: [signature]

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	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐

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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Gunnell, Edward W. (Sgt)	4919	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒

Signature: Sgt Ed Gunnell
Police Officer Assignment Patrol Sergeant
Print Supervisor Name: Chief David Petriken
Supervisor Signature: Chief David Petriken

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USE OF FORCE REPORT

INCIDENT NUMBER 15-13545

Date	Time	Day of Week	Location
08/22/2015	0203	Saturday	PArking Lot of 500 Hwy 71

Type of Incident: ☐ Crime in Progress ☐ Domestic ☒ Suspicious Person ☒ Traffic Violation ☐ Other Type of Call ☐ Other Dispute
Specify Subject without proper bibycle equipment swerving into traffic

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?	Suspect Injured?	Hospital?
Whitley, Thomas M	Y ☒ N ☐	Outstanding warrants	M	W	25	Y ☐ N ☒	Y ☐ N ☒	Y ☐ N ☒
	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

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Other (Specify)			

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

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Firearms Discharge: ☐ Intentional ☐ Accidental
Number of Shots Fired _____
Number of Hits _____
(Use 'UNK' if unknown)

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Matunas, Michael	4923	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒

Signature: _____ Police Officer Assignment Patrol

Print Supervisor Name: Michael Matunas Sgt Supervisor Signature: _____

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Whitley, Thomas M	Y ☒ N ☐	Outstanding warrants	M	W	25	Y ☐ N ☒	Y ☐ N ☒	Y ☐ N ☒
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐

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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Willms, Casey F	4931	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒

Signature: Ptl C F Willms #4931
Police Officer Assignment Patrol
Print Supervisor Name: Det. Matunas
Supervisor Signature: