



Monmouth County Use of Force Report

Agency: Spring Lake Heights
Reporting Period: 2016
Person Completing Report: Sgt. Travis Ventimiglia
Telephone Number: 732-449-6161
Date Completed: 02/13/17

Total Number of Incidents which Necessitated The Use of Force		2
Total Number of Persons Against Whom Force Was Used		2
Total Number of Incidents Involving Officer Use of Physical Force	2	
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 16-7650

Date <u>05/26/2016</u>	Time <u>0330</u>	Day of Week <u>Thursday</u>	Location <u>Spring Lake PD (311 Washington Ave)</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☒ Traffic Violation ☐ Other Type of Call ☐ Other Dispute Specify <u>DWI / resisting arrest</u>		Type of Person: ☒ Under the Influence ☐ Other Unusual Condition Specify _____	

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

[Check only if unusual condition in person exists]

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
legg, Samuel V	Y ☒ N ☐	DWI / resisting arrest	M	W	31	Y ☐ N ☒	Y ☐ N ☒	Y ☐ N ☒
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐

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

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

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 Carry / Escort	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?
Willms, Casey F	4931	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒
Signature:			Police Officer Assignment <u>Patrol</u>		
Print Supervisor Name: Ptl Bennett. #4922			Supervisor Signature:		



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USE OF FORCE REPORT

INCIDENT NUMBER 16-4010

Date 03/19/2016	Time 2216	Day of Week Saturday	Location IFO 804 Jersey Ave
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call ☒ Other Dispute		Type of Person: ☒ Under the Influence ☐ Other Unusual Condition Specify _____	
Specify Juvenile Party / Disorderly Conduct			

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

[Check only if unusual condition in person exists]

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Petillo, Anthony J	Y ☒ N ☐	Disorderly Conduct, Resisting Arrest, Disorderly Conduct (language...)	M	W	18	Y ☐ N ☒	Y ☐ N ☒	Y ☐ N ☒
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐
	Y ☐ N ☐					Y ☐ N ☐	Y ☐ N ☐	Y ☐ N ☐

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

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

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?
Willms, Casey F	4931	Y ☒ N ☐	Y ☒ N ☐	Y ☐ N ☒	Y ☐ N ☒
Signature:			Police Officer Assignment Patrol		
Print Supervisor Name:			Supervisor Signature:		