POLICE DEPARTMENT
MONMOUTH COUNTY UNIFORM REPORT SYSTEM

0. AGENCY: BRIELLE POLICE DEPT.

INVESTIGATION REPORT

1. Complaint No.	2. Mun. Code	3. Phone No.	4. UCR	21. Prosecutor's Case Number	22. Department Case Number
40878	1309	528-5050	14		88-72

5. Crime/Incident: CRIMINAL MISCHIEF:

6. NJS: 2C:17-3

7. Between	8. Hour	9. Day	10. Mo.	11. Date	12. Yr.
			3		88
At			3		88

13. Crime/Incident Location: #27

23. Victim/s/ SS No.	24. Age	25. Sex	26. Race
1. [redacted]		M	W
2. DOB: [redacted]			
3.			

27. Victim/s/ Home Address	Phone
1. 1001 Cedar LN., Brielle, New Jersey	[redacted]
2.	
3.	

28. Employer	Phone
1. [redacted]	[redacted]
2.	
3.	

14. Municipality	15. County	16. Code	29. Person Reporting Crime/Incident	30. Date and Time
BRIELLE	MONMOUTH	1309	#23	3/8/88@17:22

17. Type of Premises	18. Code	19. Weapons - Tools	20. Code	31. Address	Phone
S.F.D.	21	Other Action	56	#27	

32. Method of Operation: Unknown actor (s) or animal ripped pool cover..

33. Vehicle	34. Year	35. Make	36. Body Type	37. Color	38. Registration Number & State	39. Serial Number or Identification

VALUE STOLEN PROPERTY	40. Currency	41. Jewelry	42. Furs	43. Clothing	44. Auto	45. Misc.

46. Total Value Stolen	47. Total Value Recovered	48. Teletype Alarm	49. Technical Services	50. Technician - Agency

List Accused - List and Identify Additional Victims - Describe Perpetrators or Suspects - Action Taken Include Findings and Observations of Investigator - Physical Evidence Found - Where By Whom - Disposition and Technical Services Performed - Interview of Victims - Witnesses - Persons Contacted - Accused Suspects - List - Describe Stolen Property Value - Court Action - Attach Statements.

51. No. of Accused	52. Adult	53. Juvenile	54. Status Crime	55. Status Case	56. UCR Status	57. Date Cleared
			Active	Invest.	Month____ Year____	

58. Name	Address	SSN	59. Age	60. Sex	61. Race	62. DOB

63. Narrative: [redacted]

64. Name	65. Badge Number	66.	67. Date Report	68. Reviewed by
PTLM. JAMES SEIDEL	#145	Page 1 of 1 Pages	3/8/88	
Signature: PTLM James Seidel		69. 4-12	70. #72	71. Clear

MCUCR-IR-1-60M-AP-7/80

DEPARTMENT COPY

SPEEDIPLY® PAT'D MCP® PAT'D MBF 28

MUNICIPAL CODE NUMBER	BRIELLE BOROUGH MONMOUTH COUNTY, NEW JERSEY	OPERATIONS REPORT		
1309	POLICE DEPARTMENT	2 11:08	3 DATE OF INCIDENT 6/21/07	4 INCIDENT NUMBER 07-1742

5. NATURE OF INCIDENT	Officer Wanted / White dust deposited on homeowners property from adjacent pool work
6. LOCATION OF INCIDENT	1001 Cedar Ln. Brielle, NJ 08730
7. VICTIM COMPLAINANT ACCUSED	[redacted]

8. ACTION TAKEN

[redacted]

9. SIGNATURE Ptl. Gary Dixon 154

10. BADGE NUMBER #154

FORM 101

Brielle Police Department

601 Union Lane BRIELLE , NJ 08730 (732)528-5050

Officer Report for Incident 20BR08672

Nature: EMS CALL
Location: P992

Address: 1001 CEDAR LN
BRIELLE NJ 08730

Offense Codes: FAID
Received By: O'Sullivan, K **How Received:** 9 **Agency:** P99
Responding Officers: Clayton, R, Williams, Ke
Responsible Officer: Clayton, R **Disposition:** SC 10/25/20
When Reported: 11:03:45 10/25/20 **Occurred Between:** 11:02:47 10/25/20 and 11:02:48 10/25/20

Assigned To: **Detail:** **Date Assigned:** **/**/**
Status: **Status Date:** **/**/** **Due Date:** **/**/**

Complainant:
Last: **First:** **Mid:**
DOB: **/**/** **Dr Lic:** **Address:**
Race: **Sex:** **Phone:** **City:** ,

Offense Codes

Reported: **Observed:** FAID First Aid
Additional Offense: FAID First Aid

Circumstances

LT20 Residence or Home

Responding Officers: **Unit :**
Clayton, R P99158
Williams, Ke P99163

Responsible Officer: Clayton, R **Agency:** P99
Received By: O'Sullivan, K **Last Radio Log:** 12:30:40 10/25/20 C
How Received: 9 911 Line **Clearance:** RR Report Required
When Reported: 11:03:45 10/25/20 **Disposition:** SC **Date:** 10/25/20
Judicial Status: NCI **Occurred between:** 11:02:47 10/25/20
Misc Entry: **and:** 11:02:48 10/25/20

Statute: **Description :** **Method :**

Status: CMPLT (Rubino, T) on 08:17:51 10/26/20
Partition: P99

Date Printed: 11/10/20

Involvements

Date	Type	Description