SEASIDE HEIGHTS P.D. ARREST REPORT

CASE # 22SH 08842 TIME: 4:53 AR# 2022- 561 JV-AR# 2021- ____

PRINTS: (Y) / N PHOTO: (Y) / N UCR STAT: Y / N SUP RPT: (Y) / N

EMAIL always2skys ahead@gmail.com NAME: Esler (LAST) Aron (FIRST) E. (MIDDLE)

SS #: [redacted] DOB: 11 / 22 / 92 AGE: 29 MONIKER: ____

ADDRESS: 1616 E 5 Street (STREET) ____ (APT#) PHONE #: [redacted]

Belmar (CITY) DL #: [redacted] (NUMBER) NJ (STATE)

NJ (STATE) 07719 (ZIP) ARREST DATE: 9/21/22

SEX: (M) / F EYES: Blue RACE: W (HIS / (NON)) WGT: 170 HGT: 5'4 HAIR: Brown

OCCUPATION: / EMPLOYER: / MILITARY OR VET: Y / (N)

SCARS, MARKS, TATTOOS: L Arm "Rainbow lightning Bolt"

ARRESTING OFFICER: Wade COMPUTER ID#: 8655

CHARGE 1: 2C:12-1A(1) CHARGE 2: ____ CHARGE 3: ____ CHARGE 4: ____

(DV RELATED (Y) N)

MARITAL STATUS: M / (S) / D / W PLACE OF BIRTH: Bayonne

COMPLEXION: F COMMIT LOCATION: S&R / OCJ / POSTED / TOT - ____ (LOCATION)

BAIL: $____ CITIZEN: (Y) / N COUNTRY OF CITIZENSHIP: USA

CONSTITUTIONAL RIGHTS: (Y) / N HOW RESPONDED: ____

ANY MEDICAL CONDITIONS: (Y) / N ____

SUICIDAL: Y / N - EVER ATTEMPT SUICIDE: Y (N) ---- NCIC: HIT / (NEG) - ATS/ACS: HIT / (NEG)

DEFENDANT SIGNATURE: X [signature] DATE: 9/21/22

ARREST LOCATION: ____

COMPLAINANT(S): PO. Wade

SEASIDE HEIGHTS POLICE DEPARTMENT
Detainee Personal Property

PRISONER'S NAME (PLEASE PRINT LEGIBLY)	TIME TAKEN	DATE TAKEN	CASE NUMBER
Aron Esler	4:53	9/21/22	22SH08842

ARRESTING OFFICER	ID	SEARCHED BY	ID	PROPERTY BIN/LOCKER #
Wade	8655	PH. Boyd		

ALL PERSONAL PROPERTY MUST BE LISTED ON THIS FORM

NOTE: USE CARE IN DESCRIBING THE PROPERTY. USE GENERAL DESCRIPTORS, SUCH AS GOLD COLORED RING, SILVER COLORED MEDALLION, BLACK COLORED STONE, ETC. *DO NOT AUTHENTICATE OR ATTEST TO THE VALUE OF ALLEGED PRECIOUS METALS OR STONES.*

CURRENCY:	22.00	WATCH:		HAT:	
COIN:	1.40	CELLPHONE:		SCARF:	
TOTAL:	23.40	EYEWEAR:		GLOVES:	
CHECK(S)		RINGS: #		LACES:	
CREDIT/DEBIT:		BRACELETS:		FOOTWEAR:	
WALLET:		NECKCHAINS:		BACKPACK:	
PURSE:		BELT:		LIGHTER:	
#KEYS:		COAT:		PRESCRIPTIONS:	

OTHER PROPERTY NOT LISTED (CLOTHING, DOCUMENTS ELECTRONICS, ETC.):

2 Swiss knife, Air pods

I ATTEST THAT THE ABOVE LISTED PROPERTY REFLECTS WHAT HAD BEEN TAKEN FROM ME BY THE SEASIDE HEIGHTS POLICE DEPARTMENT.

PRISONER'S NAME	PRISONER'S SIGNATURE	DATE	TIME
Aron Esler		9/21/22	

OFFICER'S SIGNATURE	ID	SUPERVISOR'S SIGNATURE	ID

UNCOOPERATIVE DETAINEE : *YES or NO* ***PRISONER REFUSED TO SIGN:*** *YES or NO*

RETURNING PROPERTY TO DETAINEE

I HAVE INSPECTED THE PROPERTY THAT HAS BEEN RETURNED TO ME AND I AM SATISFIED THAT IT IS THE SAME PROPERTY THAT HAD BEEN TAKEN FROM ME.

PRISONER'S NAME	PRISONER'S SIGNATURE	DATE	TIME
Aron Esler		9/21/22	

OFFICER'S SIGNATURE	ID	SUPERVISOR'S SIGNATURE	ID

IF PRISONER PROPERTY IS BEING TRANSFERRED TO ANOTHER LAW ENFORCEMENT AGENCY:

☐ I ACKNOWLEDGE RECEIPT OF THE ABOVE PROPERTY

☐ I ACKNOWLEDGE RECEIPT OF A SEALED BAG CONTAINING THIS PRISONER'S PROPERTY

PRINT NAME	SIGNATURE	AGENCY	DATE	TIME
Aron Esler				

OFFICER TRANSFERRING PROPERTY NAME	ID	SIGNAUTRE	DATE	TIME

SEASIDE HEIGHTS POLICE DEPARTMENT

YOUR RIGHTS

CASE NUMBER: 22SH08892 ARREST NUMBER: 561

DATE: 9/21/22 TIME: _____ LOCATION: Booking

ADVISING OFFICER: (NAME & ID #) _____

YOU HAVE THE RIGHT TO REMAIN SILENT AND REFUSE TO ANSWER ANY QUESTIONS.

ANYTHING YOU SAY CAN BE USED AGAINST YOU IN COURT.

YOU HAVE THE RIGHT TO CONSULT WITH AN ATTORNEY FOR ADVISE BEFORE WE ASK YOU ANY QUESTIONS, AND HAVE HIM/HER WITH YOU DURING QUESTIONING.

YOU HAVE THIS RIGHT TO THE ADVICE AND PRESENCE OF AN ATTORNEY EVEN IF YOU CANNOT AFFORD TO HIRE ONE.

IF YOU WISH TO HAVE AN ATTORNEY, AND CANNOT AFFORD TO PAY FOR ONE, YOU MAY APPLY TO THE COURT AND ONE WILL BE APPOINTED FOR YOU.

A DECISION TO WAIVER THESE RIGHTS IS NOT FINAL AND YOU MAY WITHDRAW YOUR WAIVER WHENEVER YOU WISH, EITHER BEFORE OR DURING QUESTIONING.

DO YOU FULLY UNDERSTAND YOUR RIGHTS? YES / NO X

WILL YOU NOW SIGN YOUR NAME TO THIS FORM TO VERIFY THAT YOU HAVE BEEN ADVISED OF YOUR RIGHTS?
(YES / NO / REFUSAL) X _____
SIGNATURE OF ACTOR/SUSPECT

WITNESS: _____

WAIVER OF RIGHTS

I have been read the statement of my rights, as shown above. I understand what my rights are. I am willing to answer questions and make a statement.

I do not want an Attorney present during this interview. I understand and know what I am doing. No promise or threats have been made to me and no pressure of any kind has been used against me.

Signature of Actor/Suspect _____

Signature of Witness _____

Date: _____ Time: _____

COMPLAINT - WARRANT

COMPLAINT NUMBER			
1526	W	2022	000498
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

SEASIDE HGTS MUNICIPAL COURT
116 SHERMAN AVE
SEASIDE HEIGHTS NJ 08751-0000
732-830-2202 COUNTY OF: OCEAN

THE STATE OF NEW JERSEY
VS.
ARON E ESLER

ADDRESS: 1616 E STREET
BELMAR NJ 07719-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		22SH08842

COMPLAINANT
NAME: LUKUS WADE

DEFENDANT INFORMATION
SEX: M EYE COLOR: BLUE DOB: 11/22/1992
DRIVER'S LIC. #. DL STATE:
SOCIAL SECURITY #: [redacted]
TELEPHONE #: [redacted] (C) SBI #: 722434G
LIVESCAN PCN #: 152602003862

By certification or on oath, the complainant says that to the best of his/her knowledge, information and belief the named defendant on or about 09/21/2022 in SEASIDE HEIGHTS BORO , OCEAN County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO [redacted] SPECIFICALLY BY A CLOSED HAND STRIKE TO HER FACE CAUSING VISABLE INJURY.

in violation of:

Original Charge	1) 2C:12-1A(1)	2)	3)
Amended Charge			

CERTIFICATION: I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment

Signed: LUKUS WADE Date: 09/21/2022

You will be notified of your Central First Appearance/CJP date to be held at the Superior Court in the county of OCEAN
at the following address: OCEAN SUPERIOR COURT
120 HOOPER AVE
TOMS RIVER NJ 08753-0000
Date of Arrest: 09/21/2022 Appearance Date: Time: Phone: 732-504-0700

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF WARRANT

☐ Probable cause **IS NOT** found for the issuance of this complaint.

Signature of Court Administrator or Deputy Court Administrator — Date — Signature of Judge — Date

☑ Probable cause **IS** found for the issuance of this complaint. JACQUELINE HOLIDAY JUDICIAL OFFICER 09/21/2022
Signature and Title of Judicial Officer Issuing Warrant — Date

TO ANY PEACE OFFICER OR OTHER AUTHORIZED PERSON: PURSUANT TO THIS WARRANT YOU ARE HEREBY COMMANDED TO ARREST THE NAMED DEFENDANT AND BRING THAT PERSON FORTHWITH BEFORE THE COURT TO ANSWER THE COMPLAINT.

Bail Amount Set: _____ **by:** _____
(if different from judicial officer that issued warrant)

☑ **Domestic Violence – Confidential** ☐ **Related Traffic Tickets or Other Complaints** ☐ **Serious Personal Injury/ Death Involved**

Special conditions of release:
- ☐ **No phone, mail or other personal contact w/victim**
- ☐ **No possession firearms/weapons**
- ☐ **Other** (specify):

COMPLAINT - WARRANT (DEFENDANT'S COPY)