

SEASIDE HEIGHTS P.D. ARREST REPORT

CASE # **22SH08842** TIME: 4:53 AR# **2022-561** JV-AR# **2021-**

PRINTS: ☒ / N PHOTO: ☒ / N UCR STAT: Y / N SUP RPT: ☒ / N

EMAIL always 2 steps ahead@gmail.com NAME: Ester Aron E.
LAST FIRST MIDDLE

SS #: [REDACTED] DOB: 11 / 22 / 92 AGE: 29 MONIKER: _____

ADDRESS: 1616 E 5th St [REDACTED]
STREET APT# PHONE #:

Belmar [REDACTED] NT
CITY DL #: NUMBER STATE

NT 07719 ARREST DATE: 9/21/22
STATE ZIP

SEX: ☒ / F EYES: Blue RACE: N (HIS / ☒) WGT: 170 HGT: 5'4 HAIR: BROWN

OCCUPATION: / EMPLOYER: / MILITARY OR VET: Y / ☒

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

ARRESTING OFFICER: Wade COMPUTER ID#: 8655

CHARGE 1: 26112-1A(1) CHARGE 2: _____ CHARGE 3: _____ CHARGE 4: _____
(DV RELATED ☒)

MARITAL STATUS: M / ☒ / D / W PLACE OF BIRTH: Bayonne

COMPLEXION: F COMMIT LOCATION: S&R / OCJ / POSTED / TOT - _____

BAIL: \$ _____ CITIZEN: ☒ / N COUNTRY OF CITIZENSHIP: USA

CONSTITUTIONAL RIGHTS: ☒ / N HOW RESPONDED: _____

ANY MEDICAL CONDITIONS: ☒ / N

SUICIDAL: Y / N - EVER ATTEMPT SUICIDE: Y ☒ - NCIC: HIT / ☒ - ATS/ACS: HIT / ☒

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

ARREST LOCATION: _____

COMPLAINANT(S): Ptl. Wade

SEASIDE HEIGHTS POLICE DEPARTMENT

Detainee Personal Property

PRISONER'S NAME (PLEASE PRINT LEGIBLY) ARON Esler		TIME TAKEN 4:53	DATE TAKEN 9/21/22	CASE NUMBER 2251408842
ARRESTING OFFICER Wade	ID 8655	SEARCHED BY PH. Boyd		PROPERTY BIN/LOCKER #

ALL PERSONAL PROPERTY MUST BE LISTED ON THIS FORM

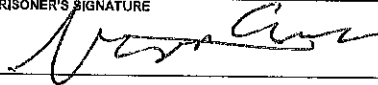
NOTE: USE CARE IN DESCRIBING THE PROPERTY. USE GENERAL DESCRIPTORS, SUCH AS GOLD COLORED RING, SILVER COLORED MEDALLION, BLACK COLORED STONE, ETC. DO NOT AUTHENTICATE OR ATTEST TO THE VALUE OF ALLEGED PRECIOUS METALS OR STONES.

CURRENCY:	22.00	WATCH:	
COIN:	1.40	CELLPHONE:	
TOTAL:	23.40	EYEWEAR:	
CHECK(S)		RINGS: #	
CREDIT/DEBIT:		BRACELETS:	
WALLET:		NECKCHAINS:	
PURSE:		BELT:	
#KEYS:		COAT:	
		HAT:	
		SCARF:	
		GLOVES:	
		LACES:	
		FOOTWEAR:	
		BACKPACK:	
		LIGHTER:	
		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 ARON Esler	PRISONER'S SIGNATURE 	DATE 9/21/22	TIME
OFFICER'S SIGNATURE	ID	SUPERVISOR'S SIGNATURE	ID

UNCOOPERATIVE DETAINEE: YES or NO

PRISONER REFUSED TO SIGN: YES or NO

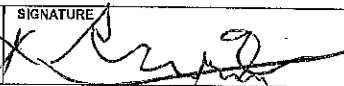
RETURNING PROPERTY TO DETAINEE

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 ARON Esler	PRISONER'S SIGNATURE	DATE 9/21/22	TIME
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 ARON Esler	SIGNATURE 	AGENCY	DATE	TIME
OFFICER TRANSFERRING PROPERTY NAME	ID	SIGNATURE	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 He

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

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**

of CHARGES

1

CO-DEFTS

POLICE CASE #:

22SH08842

COMPLAINANT

NAME:

LUKUS**WADE****THE STATE OF NEW JERSEY****VS.****ARON E ESLER**

ADDRESS:

1616 E STREET**BELMAR****NJ 07719-0000**

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BLUE**DOB: **11/22/1992**

DRIVER'S LIC. #:

DL STATE:

SOCIAL SECURITY #:

SBI #: **722434G**

TELEPHONE #:

(C)LIVSCAN 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 WADEDate: **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**Date of Arrest: **09/21/2022**

Appearance Date:

Time:

TOMS RIVER**NJ 08753-0000**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)