

Response to Resistance Report

Key West Police Department

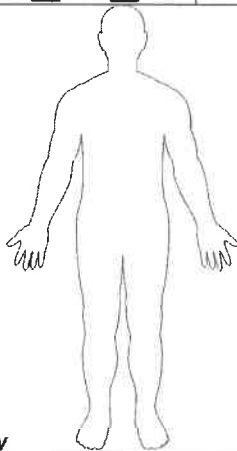
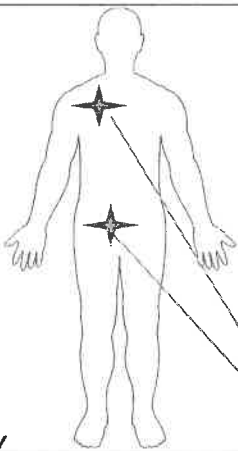
Case No: 22-1290

1. A Response to Resistance Report will be completed by the supervisor for: (Check all that apply)

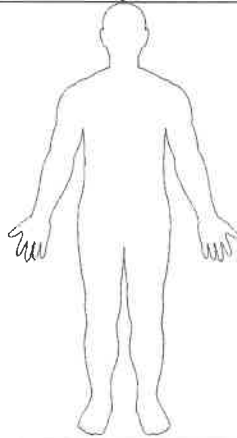
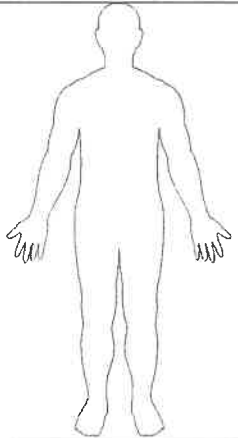
- ☒ A response through the use of non-lethal weapons,
☐ Applies weaponless physical force of strikes, kicks, or "take-downs"
☐ When any person sustains an apparent substantial or fatal injury as a result of the application of force
☐ When any person complains of injury as a result of the application of force
☐ Discharge of firearm in the line of duty off-duty or on-duty (other than for training, maintenance or ballistics testing)

INCIDENT	2. Date: 03/04/22	3. Time: 0350	4. Location: 3700 N. Roos. Blvd.	5. Incident type: Resisting w/o
	6. Resistance Level	7. Explanation	8. Response Option	9. Explanation
	<input type="checkbox"/> Passive:		<input type="checkbox"/> Physical Control	
	<input checked="" type="checkbox"/> Active:	Fleeing on foot	<input checked="" type="checkbox"/> Non-lethal Weapon	TASER
	<input type="checkbox"/> Aggressive:		<input type="checkbox"/> Deadly Force	
	<input type="checkbox"/> Deadly Force:			

SUBJECT	10. Last Name: Shelly	11. First: Austin	12. Race: W	13. Sex: M
	14. DOB: 03/13/1999	15. Height: 6'00"	16. Weight: 180	
	17. Did you observe the subject: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If NO, explain why in Section 42. If "YES", complete sections 18-22			
	18. Appeared to be: <input type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed			
	19. Injuries: <input type="checkbox"/> No <input checked="" type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 22)			
	20. Photographed: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes 21. Treated: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes By: <input checked="" type="checkbox"/> EMT/Paramedic on scene <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Detention			

SUBJECT		
	22. Anterior View	Posterior View Probe entries

OFFICER	23. Officer: Thomas Clark	24. Race: W	25. Sex: M	26. Age: 33	27. Height: 5'11"	28. Weight: 220
	29. Duty Status: <input checked="" type="checkbox"/> On-duty <input type="checkbox"/> Off-duty <input type="checkbox"/> Extra duty employment <input checked="" type="checkbox"/> Uniformed <input type="checkbox"/> Plain clothes 30. Yrs Exp: 10					
	31. Injuries: <input checked="" type="checkbox"/> No <input type="checkbox"/> Evident <input type="checkbox"/> Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)					
	32. Photographed: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes 33. Treated: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes By: <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital					
34. Response option used by this officer: (If TASER®, also reference line number from TASER® section) TASER						

OFFICER		
	35. Anterior View	Posterior View

Response to Resistance Report (continued)

Key West Police Department

Case No: 22-1290

TASER USE ONLY	36. TASER® device serial # X1200CRW6		37. TASER® device serial #	
	TASER®Cam serial # V21002AMW		TASER®Cam serial #	
	Cartridge 1 serial # C4109W9D5		Cartridge 1 serial #	
	Cartridge 2 serial # N/A		Cartridge 2 serial #	
	Number of cycles: 1		Number of cycles:	
	Type of contact: <input checked="" type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun		Type of contact: <input type="checkbox"/> Probe <input type="checkbox"/> CODS <input type="checkbox"/> Drive Stun	
	Did probes penetrate skin: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Target distance at probe launch: 10 feet		Target distance at probe launch:	
	Distance between probes: 15 inches		Distance between probes:	
	Probes removed by (name): Sgt. A. Rodriguez		Probes removed by (name):	
Device downloaded by: Sgt. A. Rodriguez		Device downloaded by:		
<input type="checkbox"/> 38. Check and list any additional TASER® devices, cartridges or details in the incident description section.				
REPORT	39. Offense/Incident Report and/or Warrant Affidavit must include:			
	<input checked="" type="checkbox"/> All necessary criminal elements. <input checked="" type="checkbox"/> All details of the arrest <input checked="" type="checkbox"/> Details articulating the subject's words, mannerisms and actions that justify the use of force. <input checked="" type="checkbox"/> Details outlining the response to resistance utilized by each officer. <input checked="" type="checkbox"/> Detailed description of injury complaints and/or observed injuries <input checked="" type="checkbox"/> Details outlining the decontamination, first aid or medical treatment provided to the officer and/or subject.			
SUPERVISOR'S INQUIRY	40. Notified Date: 03/04/2022		41. Time: 0355	
	42. Did you respond to the scene: <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)			
	43. Did you watch all relevant videos associated with the use of force? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)			
	44. Did you meet with the Officer(s): <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)			
	45. During your review did you find any potential policy violations or training issues associated with the incident? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)			
	46. Were you able to locate any independent witnesses: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)			
	Name		Address	
INT. AFF.	47. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		A. Rodriguez 3465	
	FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS		03/07/2022	
	50. Did the review of this incident conclude that use of force was in compliance with Departmental policy? <input type="checkbox"/> No <input type="checkbox"/> Yes If "No", complete section 51)		48. Preparing Supervisor's Signature / ID	
	51. Signature of Internal Affairs Inspector		49. Date	
53. If section 48 is "No" record the Professional Standards Control Number: 54. Date Entered:				

I N C I D E N T D A T A	Agency Name <i>Key West Police Department</i>		INCIDENT/INVESTIGATION REPORT				Case# <i>22-001290</i>	
	ORI <i>FL0440100</i>				Date / Time Reported <i>03/04/2022 03:49 Fri</i>			
	Location of Incident <i>3700 N ROOSEVELT BLVD, Key West FL 33040-</i>		Premise Type <i>Service / Gas Station</i>		Beat/GP <i>B5, GPB5</i>		Last Known Secure <i>03/04/2022 03:49 Fri</i>	
							At Found <i>03/04/2022 03:49 Fri</i>	
D E T A I L S	#1	Crime Incident(s) <i>Drug Possession Controlled Substance DRA</i>		(Com)		Weapon / Tools <i>NOT APPLICABLE/NONE</i>		Activity
		Entry		Exit		Security		
	#2	Crime Incident <i>Drug Possession Of Paraphernalia / Equipment - DRF</i>		(Com)		Weapon / Tools		Activity
		Entry		Exit		Security		
	#3	Crime Incident <i>Obstruction Of Justice XOX</i>		(Com)		Weapon / Tools		Activity
		Entry		Exit		Security		
MO								
V I C T I M	# of Victims <i>1</i>		Type: SOCIETY/PUBLIC/STATE		Injury:		Domestic: N	
	Victim/Business Name (Last, First, Middle) <i>V1 Society</i>		Victim of Crime # <i>1,2,3</i>		DOB <i>Age</i>	Race	Sex	Relationship To Offender
	Home Address				Home Phone			
	Employer Name/Address				Business Phone		Mobile Phone	
	VYR	Make	Model	Style	Color	Lic/Lis	VIN	
	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) Type: Injury:							
O T H E R S	Code	Name (Last, First, Middle)		Victim of Crime #		DOB <i>Age</i>	Race	Sex
	Home Address				Home Phone			
	Employer Name/Address				Business Phone		Mobile Phone	
	Type:		Injury:					
	Code	Name (Last, First, Middle)		Victim of Crime #		DOB <i>Age</i>	Race	Sex
	Home Address				Home Phone			
I N V O L V E D	Employer Name/Address				Business Phone		Mobile Phone	
	Type:		Injury:					
	Code	Name (Last, First, Middle)		Victim of Crime #		DOB <i>Age</i>	Race	Sex
	Home Address				Home Phone			
	Employer Name/Address				Business Phone		Mobile Phone	
	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found ("OJ" = Recovered for Other Jurisdiction)							
P R O P E R T Y	VI #	Code	Status Frm/To	Value	OJ	QTY	Property Description	
		<i>35</i>	<i>EVID</i>	<i>\$0.00</i>		<i>1</i>	<i>BWC 3484</i>	
		<i>35</i>	<i>EVID</i>	<i>\$0.00</i>		<i>2</i>	<i>FLEET 3484</i>	
Officer/ID# <i>CLARK, THOMAS E (3484)</i>								
Invest ID# <i>(0)</i>								
Supervisor <i>REVOREDO, NICK (2962)</i>								
Status	Complainant Signature				Case Status <i>Cleared By Arrest</i>		Case Disposition: <i>Cleared By Arrest</i>	
				<i>03/04/2022</i>		<i>03/04/2022</i>		Page 1

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 22-001290

Status Codes L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

D R U G S	UCR	Status	Quantity	Type Measure	Suspected Type	Up to 3 types of activity

Assisting Officers

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA

22-001290

Victim

Offense

DRUG POSSESSION CONTROLLED

Date / Time Reported

Fri 03/04/2022 03:49

NARCOTICS ARREST/ RESPONSE TO RESISTANCE INCIDENT

On Friday, 03/04/22, at approximately 0349hrs, I (Ofc. T. Clark), while on routine patrol of 3700 N. Roosevelt Blvd, Exxon "Uppys", observed a suspicious person, sitting in front of the closed business.

I was in full KWPD uniform in a marked KWPD patrol vehicle.

The property is posted with signs authorizing KWPD with permissions to trespass warn and remove subjects. Recently, this area has been subject to complaint, reference trespassers on the property at night.

On approach of the subject, later identified by name and DOB as, Austin Shelly 03/13/99, I could smell the strong odor of freshly burning marijuana. Austin appeared nervous by my approach.

Austin was seated on the ground and quickly began shoving what appeared to be a glass smoking pipe into a back pack in front of him. I began to tell Austin my observations. Austin then told me he was leaving. Austin then began to stand and grab his belongings. I gave Austin several lawful commands to have a seat, activating my BWC.

Austin disobeyed my lawful commands to have a seat and quickly began to actively physical resist, by fleeing my investigation. Austin ran through the parking lot and I chased him.

I deployed my department issued TASER (S/N X1200CRW6). The darts made contact with Austins back and the device achieved full Neuromuscular incapacitation (NMI). As Austin was fleeing and NMI was achieved he fell down into the parking lot pavement.

Austin then attempted to beg me not to arrest him. Austin was issued several lawful commands to place his hands behind his back, in which he ignored, attempting to negotiate. Austin finally obeyed, placing his hands behind his back. I then placed Austin under arrest.

During the course of placing Austin under arrest, he issued numerous spontaneous utterances, which were, but not limited to:

"I'm going through alot and I was just getting high"

"All I got is some weed, some Xanax"

"Please don't take me to jail"

Sgt A. Rodriguez responded to the scene to complete a Response to Resistance Incident Report. Ofc. R. Roscoe and Ofc. M. Hansell responded as back up Officer's.

Austin claimed pain to his right thumb from his fall (dislocated). Austin did not claim any further injury.

Upon search of Austin's back pack, I located the following items:

x 2 glass smoking pipes, one appeared to be bulbous, had a burned residue and used for smoking the narcotic Metamphetamine (no other legitimate purpose, known to me from experience). The other glass smoking pipe contained a burned residue, and smelled strongly of freshly burned marijuana.

REPORTING OFFICER NARRATIVE*Key West Police Department*

OCA

22-001290

Victim

Offense

DRUG POSSESSION CONTROLLED

Date / Time Reported

Fri 03/04/2022 03:49

x 1 clear plastic baggie, containing a clear rock like substance (later FTP Methamphetamine 2.1 grams).

x21 white rectangular shaped Xanax pills (identified by Ofc. M. Hansell). No prescription.

x5 Orange oval shaped Amphetamine 30mg pills (identified by Ofc. M. Hansell). No prescription.

x1 baggie, 4.1 grams of FTP Marijuana.

x1 digital scale.

KWPD EMS responded to the scene.

I transported Austin to LKMC ER for treatment (dislocated thumb). Once treated I transported Austin to MCDC.

Ofc. M. Hansell submitted my expended TASER cartridge, the suspected narcotics and their paraphernalia into KWPD Evidence.

Due to the totality of the circumstances, I found probable cause to charge Austin with the following:

x1 count, FSS 843.02, Resisting Without Violence, for willfully and actively resisting my lawful investigation, by disobeying my lawful commands to sit, for fleeing from me (full KWPD uniform), for refusing to place his hands behind his back after receiving verbal commands.

x3 count, FSS 893.13(6)(A), Possession of a Controlled Substance, for being in possession without a prescription of 21 Xanax pills (1 count), 5 Amphetamine pills (1 count) and 2.1 grams of FTP Methamphetamine (1 count). Located in his back pack.

x1 count, FSS 893.13(6)(B), Possession of Marijuana under 20 grams (no Medical Card), for the FTP Marijuana 4.1grams. Located in his back pack.

x1 count, FSS 893.147(1), Possession of Drug Paraphernalia, for the glass smoking pipes, with their burned residue, clearly identifiable to me from training and experience to serve no other legitimate purpose but for smoking narcotics. One pipe for Marijuana and one pipe for Methamphetamine. Located in his back pack.

This case is cleared by arrest.///

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Incident Report Suspect List

Key West Police Department

OCA: 22-001290

1	Name (Last, First, Middle)					Also Known As					Home Address				
	SHELLY, AUSTIN LEE										9417 BERRY LN SEBASTIAN, AR 94209				
	Business Address														
DOB		Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State.				
03/13/1999		22	W	M	N	600	190	BLN	BLU	MED	942093395 OK				
Scars, Marks, Tattoos, or other distinguishing features															
Reported Suspect Detail		Suspect Age		Race	Sex	Eth	Height		Weight		SSN				
Weapon, Type		Feature		Make		Model		Color		Caliber	Dir of Travel				
											Mode of Travel				
VehYr/Make/Model				Drs	Style		Color		Lic/St		VIN				
Notes							Physical Char								

Incident Report Related Property List

Key West Police Department

OCA: 22-001290

1	Property Description BWC 3484			Make		Model		Caliber	
	Color	Serial No.	Value	Qty	Unit	Jurisdiction			
			\$0.00	1.000		Locally			
	Status Evidence	Date 03/04/2022	NIC #	State #	Local #	OAN			
	Name (Last, First, Middle)			DOB	Age	Race	Sex		

Notes

2	Property Description FLEET 3484			Make		Model		Caliber	
	Color	Serial No.	Value	Qty	Unit	Jurisdiction			
			\$0.00	2.000		Locally			
	Status Evidence	Date 03/04/2022	NIC #	State #	Local #	OAN			
	Name (Last, First, Middle)			DOB	Age	Race	Sex		

Notes

