

Response to Resistance Report

Key West Police Department

Case No:

20-4458

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: 11/01/20 3. Time: 0130 4. Location: 200 block of Duval St. 5. Incident type: Resisting

6. Resistance Level

- ☐ Passive:
☒ Active:
☐ Aggressive:
☐ Deadly Force:

7. Explanation

Fleeing during investigation

8. Response Option

- ☒ Physical Control
☐ Non-lethal Weapon
☐ Deadly Force

9. Explanation

Take Down

SUBJECT

10. Last Name: Correa

11. First: James

12. Race: White 13. Sex: Male

14. DOB: 10/15/1992

15. Height: 5'10"

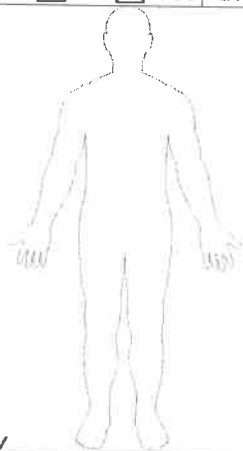
16. Weight: 185

17. Did you observe the subject: ☐ No ☒ Yes If NO, explain why in Section 42. If "YES", complete sections 18-22

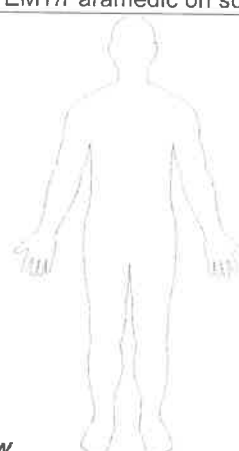
18. Appeared to be: ☒ Intoxicated ☒ Under the influence of controlled substance ☐ Emotionally / mentally disturbed

19. Injuries: ☒ No ☐ Evident ☐ Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 22)

20. Photographed: ☐ No ☒ Yes 21. Treated: ☐ No ☒ Yes By: ☒ EMT/Paramedic on scene ☐ Hospital ☐ Detention



22. Anterior View



Posterior View

OFFICER

23. Officer: Ofc. N. Howell

24. Race: W

25. Sex: M

26. Age: 31

27. Height: 6'01"

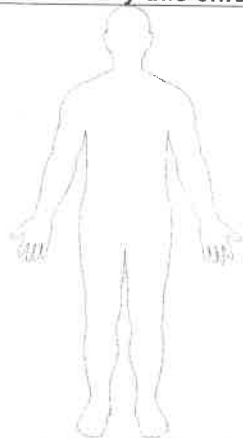
28. Weight: 225

29. Duty Status: ☒ On-duty ☐ Off-duty ☐ Extra duty employment ☒ Uniformed ☐ Plain clothes 30. Yrs Exp: 1

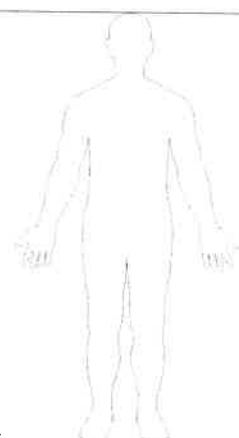
31. Injuries: ☐ No ☒ Evident ☐ Alleged (If Evident or Alleged, describe and indicate areas on charts in Section 35)

32. Photographed: ☐ No ☒ Yes 33. Treated: ☒ No ☐ Yes By: ☐ EMT/Paramedic on scene ☐ Hospital

34. Response option used by this officer: Take Down / Tackle



35. Anterior View



Posterior View

Response to Resistance Report (continued)

Key West Police Department

Case No: 20-4458

| | | | | |
|---------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------|
| TASER USE ONLY | 36. TASER® device serial # | | 37. TASER® device serial # | |
| | TASER®Cam serial # | | TASER®Cam serial # | |
| | Cartridge 1 serial # | | Cartridge 1 serial # | |
| | Cartridge 2 serial # | | Cartridge 2 serial # | |
| | Number of cycles: 1 | | Number of cycles: | |
| | Type of contact: <input 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 type="checkbox"/> Yes <input type="checkbox"/> No | | Did probes penetrate skin: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | Target distance at probe launch: | | Target distance at probe launch: | |
| | Distance between probes: | | Distance between probes: | |
| | Probes removed by (name): | | Probes removed by (name): | |
| Device downloaded by: | | 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. | | | |
| SUPERVISOR'S INQUIRY | <input checked="" type="checkbox"/> Detailed description of injury complaints and/or observed injuries N/A | | | |
| | <input checked="" type="checkbox"/> Details outlining the decontamination, first aid or medical treatment provided to the officer and/or subject. N/A | | | |
| | 40. Notified Date: 10/30/20 | | 41. Time: 2340PM | |
| | 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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "Yes," list below) | | | |
| | Name | Address | | Phone Number |
| | Sofus Nielsea | 3130 Colver Ave, Airboune MI | | 734-308-3220 |
| | | | | |
| | | | | |
| | 47. Is further review recommended: <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| | FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS | | | |
| INT. AFF. | 50. Did the review of this incident conclude that use of force was in compliance with Departmental policy? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", complete section 51) | | 48. Preparing Supervisor's Signature / ID | |
| | | | 49. Date | |
| | 53. If section 48 is "No" record the Professional Standards Control Number: | | 54. Date Entered: | |

On Sunday, 11/01/2020 at approximately 0109 hours, Ofc. Mogerely and I (Ofc. Howell) were on a foot patrol of the 200 Block of Duval Street. I was flagged down by the security staff and managers at Rick's Bar regarding a trespassing call.

As I walked up to the entrance of Rick's Bar, Tree Bar, I encountered James Dean Correa (DOB: 10/15/1992, Arrestee) who was arguing with security staff as well as the security manager, Raymundo M. Acedera. Correa was extremely irritated that he was removed from the bar. Acedera explained, repetitively, that Correa was asked to leave multiple. Correa yelled that Acedera was being unfair and continued to argue with Acedera. Ofc. Mogerely and I explained to Correa that he needed to go home and "sleep it off" several times. Correa continued to become increasingly agitated but eventually walked away. Correa returned a few moments later and walked back towards the entrance of Rick's Bar, Tree Bar yelling obscenities at Ofc. Mogerely and me. Correa began attempting to instigate an physical altercation with other patrons. Ofc. Mogerely and I instructed Correa to leave the premises because Rick's Bar management wanted him trespasses. Correa refused to leave the premises. As Ofc. Mogerely took out his handcuffs, instructed Correa to turn around and place his hands behind his back, Correa snatched away. Correa ran south on Duval Street, towards Caroline Street. I caught Correa near the entrance of The Bull and Whistle Bar (224 Duval Street). Given these circumstances and Correa's level of resistance rising, I performed a takedown technique and took Correa to the ground in a control manner. Correa continued to physically resist as Ofc. Mogerely and I placed him in handcuffs. Ofc. Mogerely and I placed Correa in the back of my patrol car.

As I was getting ready to leave the area, Sofus James Nielsen (DOB: 06/27/1969, Witness) approached me and stated he witnessed the entire incident. I asked Nielson if he would fill out a Witness Statement Form. Nielson provided a signed witness statement.

I transported Correa to the Monroe County Detention Center.

Based on the facts and evidence, I believe there is probable cause that on 11/01/2020, James D. Correa did knowingly and intentionally violate F.S.S. 810.08-1 Trespass in Structure, by actually and intentionally remaining on the premises and refusing to leave the property, after being warned several times.

Based on the facts and evidence, I believe there is probable cause that on 11/01/2020, James D. Correa did knowingly and intentionally violate F.S.S. 509.143 Disorderly Conduct on the Premises of an Establishment, by purposely and willingly engaging in breaching the peace, by attempting incite a fight or brawl, on the premises of Rick's Bar, which is a licensed establishment.

Based on the facts and evidence, I believe there is probable cause that on 11/01/2020, James D. Correa did knowingly and intentionally violate F.S.S. 843.02 Resisting Officer without Violence, by purposely attempting to run away from me and resist Ofc. Mogerely and me as we detained him while we were engaged in our legal, lawful duties as uniformed law enforcement officers.

Correa appeared to be under the influence of alcohol. Correa's speech was slurred, and his eyes were bloodshot. Correa's breath had the odor of alcoholic intoxicants.

Correa was not injured during takedown technique.

I placed the signed Witness Statement Form in Key West Police Department Records Division.

My BWC was not activated for the incident.

At this time, no further information.

OFC. W. HOWEN  4059

Form 100-100 (Rev. 1-78) - Incident Report. Includes sections for General Information, Victim Information, Person Information, Injury Information, Witness Information, and Suspect Information. The form is filled out with handwritten details for a case involving a person named Rick's Bar and a person named James Dean.

AGENCY REPORT

CRIMES AGAINST PERSONS M.O.

| | |
|------------------------------------------------|--|
| B. CHARACTERISTIC OF SUSPECT (SEX CRIMES ONLY) | |
|------------------------------------------------|--|

CRIME SCENE SPECIFICS