

# Response to Resistance Report

Key West Police Department

Case No: 23-2621

**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)

**2. Date:** 5/4/23      **3. Time:** 1050      **4. Location:** Key Haven Boat Ramp      **5. Incident type:** Resisting

INCIDENT	<b>6. Resistance Level</b>	<b>7. Explanation</b>	<b>8. Response Option</b>	<b>9. Explanation</b>
	<input checked="" type="checkbox"/> Passive:	Refused Commands	<input checked="" type="checkbox"/> Physical Control	Takedown/ Body strikes
<input checked="" type="checkbox"/> Active:	Pulled Away	<input type="checkbox"/> Non-lethal Weapon		
<input checked="" type="checkbox"/> Aggressive:	Kicked Deputy	<input type="checkbox"/> Deadly Force		
<input checked="" type="checkbox"/> Deadly Force:	Reached for Machete			

**10. Last Name:** Solano      **11. First:** Crucito      **12. Race:** Black      **13. Sex:** M

**14. DOB:** 1/23/91      **15. Height:** 508      **16. Weight:** 160

**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

SUBJECT	<b>22. Anterior View</b>	<b>Posterior View</b>
		

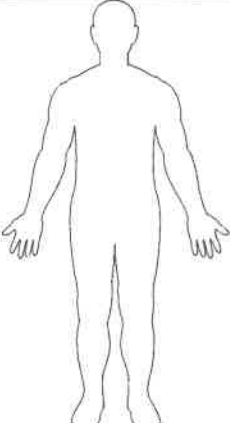
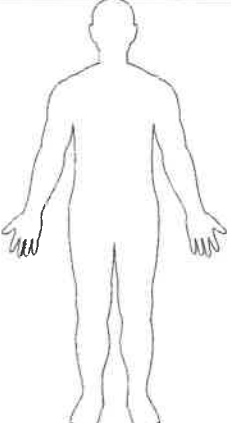
**23. Officer:** Tim Malak      **24. Race:** W      **25. Sex:** M      **26. Age:** 32      **27. Height:** 600      **28. Weight:** 230

**29. Duty Status:**  On-duty     Off-duty     Extra duty employment     Uniformed     Plain clothes      **30. Yrs Exp:** 10

**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:** Takedown – Strikes to Body

OFFICER	<b>35. Anterior View</b>	<b>Posterior View</b>
		

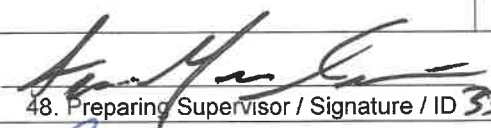
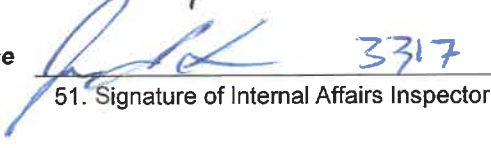


# Response to Resistance Report (continued)

Key West Police Department

23-2621

Case No: \_\_\_\_\_

<b>TASER USE ONLY</b>	<b>36. TASER® device serial #</b>		<b>37. TASER® device serial #</b>		
	Battery serial #		Battery serial #		
	Cartridge 1 serial #1	serial #2	Cartridge 1 serial #1	serial #2	
	Cartridge 2 serial #3	serial # 4	Cartridge 2 serial # 3	serial #4	
	Number of cycles:		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"/> <b>38. Check and list any additional TASER® devices, cartridges or details in the incident description section.</b>					
<b>REPORT</b>	<b>39. Offense/Incident Report and/or Warrant Affidavit must include:</b>				
	<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.					
<b>SUPERVISOR'S INQUIRY</b>	<b>40. Notified Date:</b> 5/4/23		<b>41. Time:</b> 1115		
	<b>42. Did you respond to the scene:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	<b>43. Did you watch all relevant videos associated with the use of force?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "No", explain why)				
	Additional MCSO videos are available – KRPD BWC knocked off during use of force				
	<b>44. Did you meet with the Officer(s):</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	<b>45. During your review did you find any potential policy violations or training issues associated with the incident?</b>				
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)				
	<b>46. Were you able to locate any independent witnesses:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "Yes," list below)				
	Name		Address		Phone Number
	Connie Christen		5711 College Rd. Key West, FL, 33040		917 743-5367
<b>SGT. M. SIRACUSE</b>				5.4.23	
47. Preparing Supervisor / Printed Name		48. Preparing Supervisor / Signature / ID 3366		49. Date	
<b>INT. AFF.</b>	<b>50. Did the review of this incident conclude that use of force was in compliance with Departmental policy?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes				
					
		51. Signature of Internal Affairs Inspector 3317		52. Date 7/27/2023	



# INCIDENT/INVESTIGATION REPORT

I N C I D E N T D A T A	Agency Name <i>Key West Police Department</i>			Case# <i>23-002621</i>		
	ORI <i>FL0440100</i>			Date / Time Reported <i>05/04/23 10:48:25 10:48 Thu</i>		
	Location of Incident <i>KEY HAVEN RD, Key West 33040</i>			Gang Relat <i>NO</i>	Premise Type <i>Highway/road/alley/st</i>	Beat/GP
				Last Known Secure <i>05/04/23 10:48:24 10:48 Thu</i>		At Found <i>05/04/23 10:48:25 10:48 Thu</i>
#1	Crime Incident(s) <i>Assist Other Agency ASA</i>		(Com)	Weapon / Tools		Activity
				Entry	Exit	Security
#2	Crime Incident		( )	Weapon / Tools		Activity
				Entry	Exit	Security
#3	Crime Incident		( )	Weapon / Tools		Activity
				Entry	Exit	Security

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V I C T I M	# of Victims <i>0</i>	Type:	Injury:				Domestic: <i>N</i>					
	<b>V1</b>	Victim/Business Name (Last, First, Middle)				Victim of Crime #	DOB	Race	Sex	Relationship To Offender	Resident Status	Military Branch/Status
	Home Address				Email				Home Phone			
	Employer Name/Address						Business Phone			Mobile Phone		
	VYR	Make	Model	Style	Color	Lic/Lis	VIN					

O T H E R S  I N V O L V E D	CODES: V- Victim (Denote V2, V3) WI = Witness IO = Involved Other RP = Reporting Person (if other than victim)											
	Type: <i>INDIVIDUAL</i>						Injury:					
	<b>IO</b>	Name (Last, First, Middle) <i>HUGHES, JENNIFER CATHERINE</i>				Victim of Crime #	DOB <i>10/05/82</i>	Race <i>W</i>	Sex <i>F</i>	Relationship To Offender	Resident Status <i>Resident</i>	Military Branch/Status
	Home Address <i>128 AVENUE F KEY WEST, FL 33040</i>				Email				Home Phone <i>305-296-2424</i>			
	Employer Name/Address <i>Monroe County Sheriffs Office, 5525 COLLEGE RD (DEPUTY)</i>						Business Phone <i>305-396-2424</i>			Mobile Phone		

P R O P E R T Y	1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown ("OJ" = Recovered for Other Jurisdiction)													
	VI #	Code	Status Frm/To	Value	OJ	QTY	Property Description			Make/Model			Serial Number	
		<i>27</i>	<i>EVID</i>	<i>\$0.00</i>			<i>1</i>	<i>BWC 4045</i>			<i>AXON</i>			

Officer/ID#	<i>MALAK, TIMOTHY J (4045)</i>			Supervisor	<i>SIRACUSE, MARK W (3366)</i>		
Invest ID#	<i>(0)</i>			Case Status	<i>Information Only</i>		
Status	Complainant Signature			Case Disposition:	<i>05/04/23</i>		



# INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 23-002621

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

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

Assisting Officers

Suspect Hate / Bias Motivated:

NARRATIVE





REPORTING OFFICER NARRATIVE

Key West Police Department

OCA
23-002621
Date / Time Reported
Thu 05/04/23 10:48

Victim	Offense	Date / Time Reported
	ASSIST OTHER AGENCY	Thu 05/04/23 10:48

On 5/4/2023, I, Officer Malak, responded to Key Haven Rd in reference to assisting county with an animal incident.

Upon arrival, I spoke to Deputy Hughes, and she explained she was on scene to assist Florida Keys SPCA in the removal of puppies from a man living under the bridge (See MCSO 23-003676 for complete background on the case).

Deputy Hughes and I approach the tent and Deputy Hughes introduced herself to the male, later identified as Serrano Solano Crucito Jr. Deputy Hughes explained the reason for us being there and the male became argumentative, saying he was not giving his puppies because he has rights. Florida Keys SPCA tried to explain the situation to Crucito, but Crucito did not want to hear the reasoning why he was losing his puppies.

Due to the clutter in the tent, Deputy Hughes asked Crucito to exit the tent so we could speak to him. Crucito stated he did not want to exit the tent, however, began to reach behind him, with Deputy Hughes ordering him to stop reaching. Crucito stated he had a machete and continued to reach behind him. Deputy Hughes and I went into the tent to prevent Crucito from grabbing the machete he stated he had. Deputy Hughes looked behind where Crucito was sitting and removed a machete from the pile of belongings. Crucito continued to reach so I ordered him to leave the tent due to safety concerns. Crucito refused and continued to reach behind him. Crucito then stood up with haste and lunged in the direction of Deputy Hughes. I grabbed Crucito and used an arm drag takedown to gain control of his person. Once on the ground, we instructed Crucito to stop resisting, with him kicking Deputy Hughes multiple times in the Torso and Face. During the struggle, Crucito's dog bit Deputy Hughes more than two times before SPCA removed the dog from the scene. Deputy Hughes attempted to handcuff Crucito, but when putting the restraints on, Crucito pulled away, attempting to utilize the restrains as a weapon. I quickly gained control of Crucito's wrists, however Crucito kept kicking Deputy Hughes. Crucito continued to resist, and after multiple warnings, Deputy Hughes tased him twice. The Tasing assisted in us gaining control of Crucito and we held him until other units arrived on location. Once backup officers arrived on scene, Crucito was properly secured and evaluated by rescue.

Crucito was cleared by rescue and taken into custody by MCSO.

It should be noted, upon our initial arrival to the scene, Crucito was not wearing a neck brace. When the struggle ensued, Crucito stated he had an injured neck and needed his brace. Once Crucito was under control, I retrieved his neck brace from the tent and gave it to him.

I contacted my On Duty Supervisor, Sgt Siracuse. Sgt Siracuse arrived on location and completed an RRI report for the incident (see completed RRI report for further).

Monroe County Sheriff's Department charged Serrano Solano Crucito Jr with the following; FSS 843.02 (Resisting W/O Violence), FSS 843.01 (Resisting With Violence), FSS 784.07.2c (Felony Assault), FSS 784.02.2b (Felony Battery), and a County Municipal code violation.

My BWC was active for this incident, and I cleared with no further actions.



# Incident Report Suspect List

Key West Police Department

OCA: 23-002621

<b>1</b>	Name (Last, First, Middle) <i>CRUCITO, SERRANO SOLANO Jr</i>					Also Known As					Home Address <i>1 GENERAL DELIVERY KEY WEST, FL 33040 786-883-5230</i>				
	Business Address <i>NONE</i>														
DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State					
<i>01/23/91</i>	<i>32</i>	<i>B</i>	<i>M</i>	<i>N</i>	<i>510</i>	<i>165</i>	<i>BLK</i>	<i>BRO</i>	<i>DRK</i>	<i>MD10272384167 MD</i>					
Scars, Marks, Tattoos, or other distinguishing features															

<i>Reported Suspect Detail</i>		Suspect Age			Race	Sex	Eth	Height		Weight		SSN
Weapon, Type	Feature	Make		Model			Color	Caliber	Dir of Travel			
									Mode of Travel			
Veh Yr / Make / Model			Drs	Style		Color	Lic Plate / State			VIN		

Notes

Physical Char



## Incident Report Related Property List

Key West Police Department

OCA: 23-002621
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<b>1</b>	Property Description <b>BWC 4045</b>	Make <b>AXON</b>	Model	Caliber			
	Color	Serial No.	Value <b>\$0.00</b>	Qty <b>1.000</b>	Unit <b>EA</b>	Jurisdiction <b>Locally</b>	
	Status <b>Evidence</b>	Date <b>05/04/23 0</b>	NIC #	State #	Local #	OAN	
	Name (Last, First, Middle) <b>* No name *</b>			DOB	Age	Race	Sex

Notes

