

Response to Resistance Report

Key West Police Department

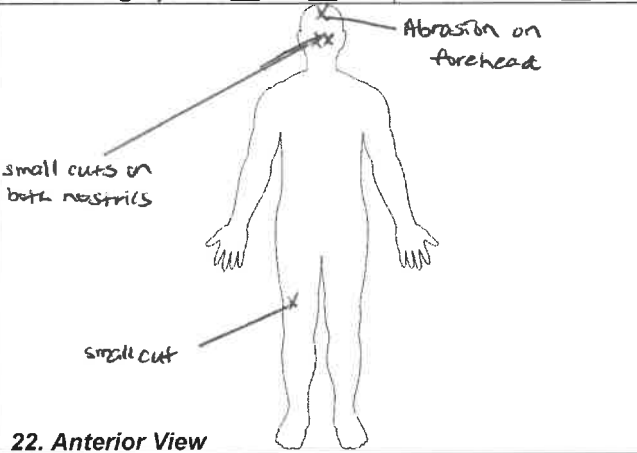
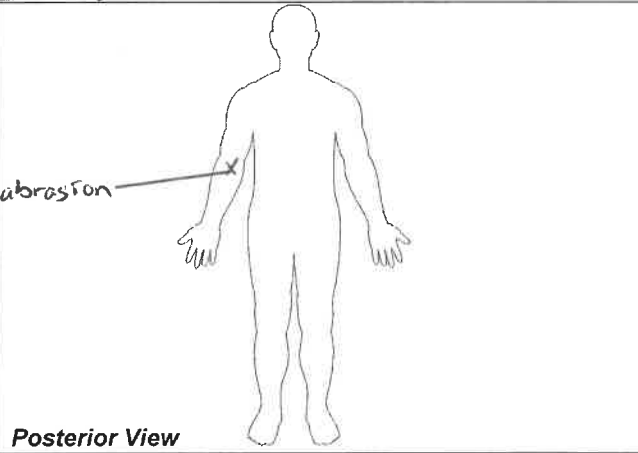
Case No: 24-1668

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

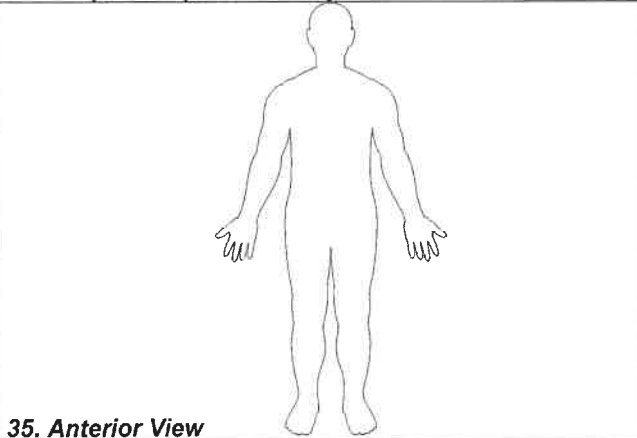
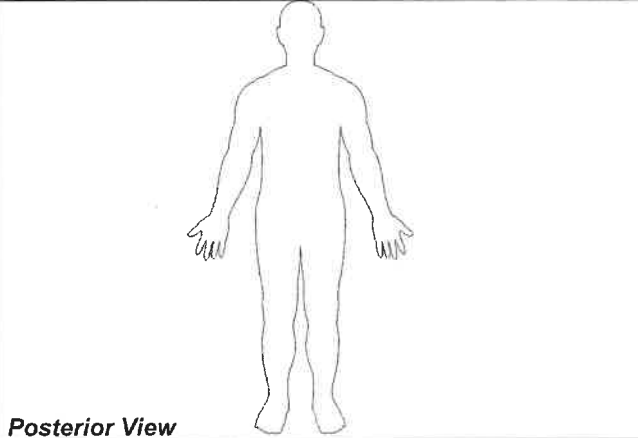
- A response through the use of non-lethal weapons,
- Applies weaponless physical force of strikes, kicks, or "take-downs"
- When any person sustains an apparent substantial or fatal injury as a result of the application of force
- When any person complains of injury as a result of the application of 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: 03/24/2024		3. Time: 0307		4. Location: 400 block of Greene		5. Incident type: Disorderly	
	6. Resistance Level		7. Explanation		8. Response Option		9. Explanation	
	<input checked="" type="checkbox"/> Passive:		<u>Disobeying/ignoring commands</u>		<input checked="" type="checkbox"/> Physical Control		<u>Takedown via rear tackle</u>	
	<input checked="" type="checkbox"/> Active:		<u>Running away two times</u>		<input type="checkbox"/> Non-lethal Weapon			
<input type="checkbox"/> Aggressive:				<input type="checkbox"/> Deadly Force				
<input type="checkbox"/> Deadly Force:								

10. Last Name: Sanchez		11. First: Raul		12. Race: W		13. Sex: M	
14. DOB: 05/27/1991		15. Height: 5'04"		16. Weight: 140			
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 checked="" 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 type="checkbox"/> EMT/Paramedic on scene <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Detention							

SUBJECT	 <p>22. Anterior View</p>	 <p>Posterior View</p>
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23. Officer: Jack Gruba		24. Race: W		25. Sex: M		26. Age: 28		27. Height: 6'00"		28. Weight: 200	
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: 2.5											
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: Takedown via rear tackle											

OFFICER	 <p>35. Anterior View</p>	 <p>Posterior View</p>
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Response to Resistance Report (continued)

Key West Police Department

Case No: 24-1668

TASER USE ONLY	36. TASER® device serial #		37. TASER® device serial #		
	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: 2		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. <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: 03/24/2024		41. Time: 0308		
	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		Phone Number
	<u>Tiffini Peters</u>		<u>Tiffini D. Peters / 3269</u>		03/24/2024
	47. Preparing Supervisor / Printed Name		48. Preparing Supervisor / Signature / ID		49. Date
			<u>[Signature]</u> 3386		<u>4/3/24</u>
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		51. Signature of Internal Affairs Inspector		
				52. Date	

INCIDENT/INVESTIGATION REPORT

I N C I D E N T D A T A	Agency Name Key West Police Department				Case# 24-001668	
	ORI FL0440100				Date / Time Reported 03/24/2024 03:04 Sun	
	Location of Incident 202 DUVAL ST, Key West FL 33040			Gang Relat NO	Premise Type Highway/road/alley/st	Beat/GP B1, GPB1
	Last Known Secure 03/24/2024 03:04 Sun			At Found 03/24/2024 03:04 Sun		
	#1	Crime Incident(s) Disorderly Conduct DCA	(Com)	Weapon / Tools		Activity
			Entry	Exit	Security	
#2	Crime Incident Resist Arrest / Escape XOM	(Com)	Weapon / Tools		Activity	
			Entry	Exit	Security	
#3	Crime Incident	()	Weapon / Tools		Activity	
			Entry	Exit	Security	

M O V I C T I M	# of Victims 2		Type: INDIVIDUAL		Injury: None		Domestic: N				
	V1	Victim/Business Name (Last, First, Middle) HICKS-EBERSON, ALLAN RICHARD			Victim of Crime # 1	DOB 08/04/1981 Age 42	Race W	Sex M	Relationship To Offender 1ST	Resident Status Resident	Military Branch/Status
	Home Address 31254 AVENUE G, Big Pine Key, FL 33043-				Email			Home Phone 248-925-9549			
	Employer Name/Address JOHNNY ROCKETS (MANAGER)				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: SOCIETY/PUBLIC/STATE					Injury:					
	Code V2	Name (Last, First, Middle) SOCIETY			Victim of Crime # 2	DOB / / Age	Race	Sex	Relationship To Offender	Resident Status N/A	Military Branch/Status
	Home Address				Email				Home Phone		
	Employer Name/Address				Business Phone				Mobile Phone		
Type:					Injury:						
Code	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			

P R O P E R T Y	I = 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		
		27	EVID	\$0.00		1	BWC 4156				
		27	EVID	\$0.00		1	AXON FLEET				
Officer/ID#		GRUBA, JACK Z (4156)									
Invest ID#		(0)				Supervisor (0)					
Status	Complainant Signature				Case Status <i>Cleared By Arrest</i> 03/24/2024			Case Disposition:		Page 1	

INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 24-001668

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
BOUVIER, K. (3356), TORRECILLAS, J. (3759), PETERS, T. (3269)

Suspect Hate / Bias Motivated:

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

		OCA 24-001668
Victim <i>HICKS-EBERSOLE, ALLAN</i>	Offense <i>DISORDERLY CONDUCT</i>	Date / Time Reported <i>Sun 03/24/2024 03:04</i>

-- Raul Adrian Sanchez Arrest Narrative:

On 03/24/2024, at approximately 0300 hours, I, Ofc. Gruba was flagged down at the corner of Charles St and Duval St, by the manager of Rock House Live, Allan Hicks-Ebersole, in reference to a male, later identified as Raul Sanchez, who had been causing issues at his bar and surrounding businesses all night. Sanchez at that time was dancing in the street, in front of Ricks Bar, 202 Duval St, impeding traffic.

Hicks earlier in the night, at approximately 0217 hours, told me Sanchez had been going into Rock House Live, digging through the trash inside of the business and yelling at the staff. After Hicks removed the Sanchez from Rock House Live, Sanchez went into the hotdog stand, located across Greene St. I spoke to the owner of the hotdog stand, who told me he had gone into Rock House Live for a few moments. When the hotdog stand owner came back outside, he saw Sanchez inside of the hotdog stand. The owner of the stand yelled at Sanchez and Sanchez ran off. The owner did not notice anything missing from his stand.

As I was talking to Hicks on the corner of Charles St and Duval St, I could see Sanchez dancing in the middle of the street and holding up traffic. I also noticed Sanchez had a backpack and a water bottle, filled with a dark liquid, strewn in the street, further making it harder for traffic to get around him. I walked up to Sanchez to address his bizarre behavior. As I walked closer, Sanchez saw me, grabbed his belongings and ran towards Greene St. I yelled for Sanchez to stop, but he did not. I walked toward the 400 block of Greene St and was told he ran North on Fitzpatrick St. I went onto Fitzpatrick, but did not see Sanchez anywhere. As I was walking back toward Greene St, Sanchez started to turn the corner onto Fitzpatrick, almost running into me. Sanchez changed direction after seeing me and ran West on Greene St. I ran after Sanchez, yelling several times for Sanchez to stop. In the street at 411 Greene St, I escorted Sanchez to the ground from behind. Sanchez sustained a small abrasion to his forehead from the takedown. I asked Sanchez several times to place his hands behind his back. Sanchez finally placed both arms behind his back after I secured his right one behind the back. I placed Sanchez in handcuffs and had him sit on the nearby curb. I retrieved my vehicle and placed him in it.

I again spoke to Hicks, who told me Sanchez's behavior was so out of hand that it corrupted his public morals.

I read Sanchez his Miranda Rights. Sanchez declined to speak without a lawyer present.

I transported Sanchez to Lower Keys Medical Center where he was medically cleared. I transported Sanchez to Monroe County Detention Center where he was handed over to detention deputies.

Raul Sanchez violated Florida State Statute 877.03, disorderly conduct. Sanchez committed acts that were of a nature that corrupted the public morals of Allan Hicks.

Raul Sanchez violated Florida State Statute 843.02, resist without violence. Sanchez knowingly and willfully [resisted] [obstructed] [opposed] myself (Ofc. Gruba). At the time, I was engaged in the lawful execution of a legal duty. At the time, I was an officer. At the time, Sanchez knew I was an officer due to my department issued Key West Police class "b" uniform and prior encounters that we have had for similar issues.

Sanchez was issued a citation (AIGHWZE) for pedestrian obstructing traffic, 316.2045-1.

My BWC was activated during this incident.

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA 24-001668
Date / Time Reported Sun 03/24/2024 03:04

Victim <i>HICKS-EBERSON, ALLAN</i>	Offense <i>DISORDERLY CONDUCT</i>	Date / Time Reported <i>Sun 03/24/2024 03:04</i>
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End of report.

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Incident Report Suspect List

Key West Police Department

OCA: 24-001668

1	Name (Last, First, Middle) <i>SANCHEZ, RAUL ADRIAN</i>					Also Known As					Home Address <i>1 GENERAL DELIVERY KEY WEST, FL 33040 305- -</i>				
Business Address <i>UNKNOWN, UNKNOWN</i>															
DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State					
<i>08/27/1991</i>	<i>32</i>	<i>W</i>	<i>M</i>	<i>H</i>	<i>505</i>	<i>140</i>	<i>BLK</i>	<i>BRO</i>	<i>MBR</i>	<i>46188003 TX</i>					
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								VIN							
Veh Yr / Make / Model			Drs	Style	Color	Lic Plate / State			VIN						
Notes										Physical Char					

Incident Report Related Property List

Key West Police Department

OCA: 24-001668

1	Property Description BWC 4156	Make	Model	Caliber
	Color	Serial No.	Value \$0.00	Qty 1.000
			Unit	Jurisdiction Locally
	Status Evidence	Date 03/24/2024	NIC #	State #
			Local #	OAN
	Name (Last, First, Middle) * No name *		DOB	Age
			Race	Sex

Notes

2	Property Description AXON FLEET	Make	Model	Caliber
	Color	Serial No.	Value \$0.00	Qty 1.000
			Unit	Jurisdiction Locally
	Status Evidence	Date 03/24/2024	NIC #	State #
			Local #	OAN
	Name (Last, First, Middle) * No name *		DOB	Age
			Race	Sex

Notes