

# Response to Resistance Report

Key West Police Department

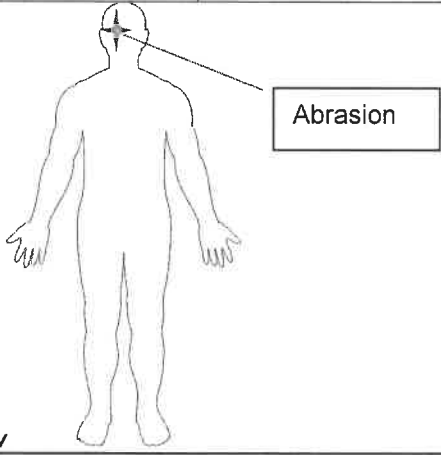
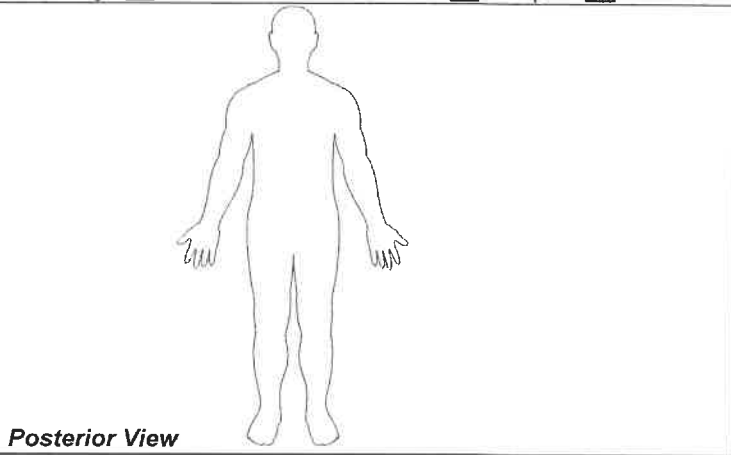
Case No: 22-2977

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

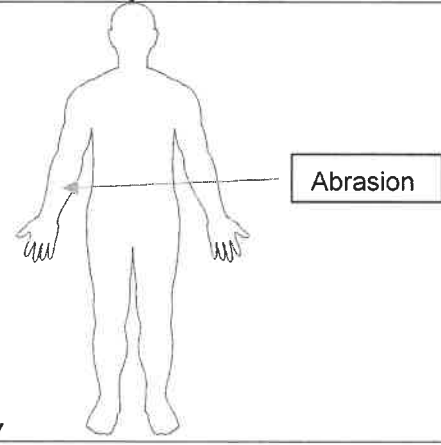
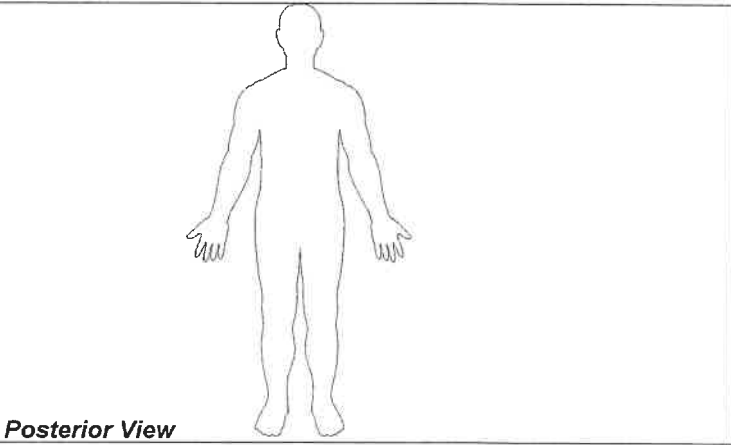
A response through the use of non-lethal weapons,  
 Applies weaponless physical force of strikes, kicks, or "take-downs"  
 When any person sustains an apparent substantial or fatal injury as a result of the application of force  
 When any person complains of injury as a result of the application of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

<b>INCIDENT</b>	<b>2. Date:</b> 05/22/2022	<b>3. Time:</b> 0246	<b>4. Location:</b> Greene/Telegraph	<b>5. Incident type:</b> S36B
	<b>6. Resistance Level!</b>	<b>7. Explanation</b>	<b>8. Response Option</b>	<b>9. Explanation</b>
	<input type="checkbox"/> Passive: <input checked="" type="checkbox"/> Active: <input type="checkbox"/> Aggressive: <input type="checkbox"/> Deadly Force:	Ran away during a battery investigation	<input checked="" type="checkbox"/> Physical Control <input type="checkbox"/> Non-lethal Weapon <input type="checkbox"/> Deadly Force	Tackle

<b>10. Last Name:</b> Miller	<b>11. First:</b> Tyler	<b>12. Race:</b> W	<b>13. Sex:</b> M
<b>14. DOB:</b> 05/18/2001	<b>15. Height:</b> 5'07"	<b>16. Weight:</b> 135	
<b>17. Did you observe the subject:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If NO, explain why in Section 42. If "YES", complete sections 18-22			
<b>18. Appeared to be:</b> <input checked="" type="checkbox"/> Intoxicated <input type="checkbox"/> Under the influence of controlled substance <input type="checkbox"/> Emotionally / mentally disturbed			
<b>19. Injuries:</b> <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)			
<b>20. Photographed:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <b>21. Treated:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital <input checked="" type="checkbox"/> Detention			

<b>SUBJECT</b>	 <p><b>22. Anterior View</b></p>	 <p><b>Posterior View</b></p>
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<b>23. Officer:</b> Jack Gruba	<b>24. Race:</b> W	<b>25. Sex:</b> M	<b>26. Age:</b> 26	<b>27. Height:</b> 6'00"	<b>28. Weight:</b> 190
<b>29. Duty Status:</b> <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 <b>30. Yrs Exp:</b> 0.5					
<b>31. Injuries:</b> <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 35)					
<b>32. Photographed:</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <b>33. Treated:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <b>By:</b> <input type="checkbox"/> EMT/Paramedic on scene <input type="checkbox"/> Hospital					
<b>34. Response option used by this officer:</b> Takedown - tackle					

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

Key West Police Department

Case No: 22-2977

<b>TASER USE ONLY</b>	<b>36. TASER® device serial #</b>		<b>37. TASER® device serial #</b>		
	TASER®Cam serial #		TASER®Cam serial #		
	Cartridge 1 serial #		Cartridge 1 serial #		
	Cartridge 2 serial #		Cartridge 2 serial #		
	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> 05/22/2022		<b>41. Time:</b> 0250 hours		
	<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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "No", explain why)				
	<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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes (If "Yes," list below)				
	<b>06.28 - BWC</b>				
	<b>BWC was knocked off during event but no buffering was recorded</b>				
	<b>46. Were you able to locate any independent witnesses:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)				
	Name		Address		Phone Number
<b>47. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		J. Conaty 3755		05/22/2022	
<b>FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS</b>		48. Preparing Supervisor's Signature / ID		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 type="checkbox"/> Yes If "No", complete section 51				
	51. Signature of Internal Affairs Inspector		52. Date		
	53. If section 48 is "No" record the Professional Standards Control Number:		54. Date Entered:		

# INCIDENT/INVESTIGATION REPORT

INCIDENT DATA	Agency Name <i>Key West Police Department</i>		Case# <i>22-002977</i>		
	ORI <i>FL0440100</i>		Date / Time Reported <i>05/22/2022 02:46 Sun</i>		
	Location of Incident <i>432 GREENE ST, Key West FL 33040-</i>		Premise Type <i>Highway / Street / Road/</i>	Beat/GP <i>B1, GPB1</i>	Last Known Secure <i>05/22/2022 02:46 Sun</i>
			At Found <i>05/22/2022 02:46 Sun</i>		
MO	#1	Crime Incident(s) <i>Resist Arrest / Escape XOM</i>	(Com)	Weapon / Tools <i>NOT APPLICABLE/NONE</i>	Activity
	#2	Crime Incident	( )	Weapon / Tools	Activity
	#3	Crime Incident	( )	Weapon / Tools	Activity

VICTIM	# of Victims <i>1</i>	Type: SOCIETY/PUBLIC/STATE	Injury:				Domestic: N		
	V1	Victim/Business Name (Last, First, Middle) <i>Society</i>	Victim of Crime # <i>1</i>	DOB Age	Race	Sex	Relationship To Offender	Resident Status <i>N/A</i>	Military Branch/Status
	Home Address						Home Phone		
	Employer Name/Address					Business Phone	Mobile Phone		
	VYR	Make	Model	Style	Color	Lic/Lis	VIN		

OTHERS INVOLVED	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)								
	Type: INDIVIDUAL			Injury:					
	Code <i>IO</i>	Name (Last, First, Middle) <i>PEARCE, CHAZZ HOWARD</i>	Victim of Crime #	DOB Age <i>10/31/1988 33</i>	Race <i>B</i>	Sex <i>M</i>	Relationship To Offender	Resident Status <i>Non-Resident</i>	Military Branch/Status
	Home Address <i>404 NE 208TH TERRACE MIAMI, FL 33179</i>						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)								
VI #	Code	Status Frm/Tc	Value	OJ	QTY	Property Description	Make/Model	Serial Number
	<i>35</i>	<i>EVID</i>	<i>\$0.00</i>		<i>1</i>	<i>BWC 4156</i>		
	<i>35</i>	<i>EVID</i>	<i>\$0.00</i>		<i>1</i>	<i>COBAN</i>		

PROPERTY	Officer/ID#	<i>GRUBA, JACK Z (4156)</i>		Supervisor	<i>(0)</i>
	Invest ID#	<i>GRUBA, JACK Z (4156)</i>			
Status	Complainant Signature	Case Status <i>Cleared By Arrest</i>	<i>05/22/2022</i>	Case Disposition: <i>Cleared By Arrest</i>	<i>05/22/2022</i>

# INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 22-002977

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  
*CONATY, J.T. (3755)*

Suspect Hate / Bias Motivated:

## INCIDENT/INVESTIGATION REPORT

Narr. (cont.) OCA: 22-002977

*Key West Police Department*

NARRATIVE

REPORTING OFFICER NARRATIVE

Key West Police Department

OCA 22-002977
Date / Time Reported Sun 05/22/2022 02:46

Victim Society	Offense RESIST ARREST / ESCAPE
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-- Tyler Edward Miller Arrest Narrative:

On May 22, 2022, at approximately 0246 hours, I, Ofc. Gruba, observed a large commotion going on at the corner of Greene St and Duval St, while responding to another call.

As I approached, I saw a male, later identified as Chazz Howard Pearce lying unconscious on the sidewalk and a male, later identified as Tyler Edward Miller, yelling at the unconscious person, with his friends trying to hold him back. I told Miller to calm down and take a seat on the sidewalk. When Miller saw me, he ran West on Greene St. As soon as he started to run, I told him to stop. Miller did not stop. I ran after him. Miller tried to turn onto Telegraph Ln from Greene St. At that point I had caught up to Miller and redirected him to the ground. I placed Miller in handcuffs and had him sit on the sidewalk.

Miller told me that he was very sorry for running and that he did not know what he was thinking. I asked him what his involvement was with the guy lying unconscious on the ground. Miller told me that himself and his friends were yelling back and forth with Pearce and his friends. Miller said that he did not know who hit him.

I received information that there was video footage of the altercation. According to the video, Miller did not fit the description on the person who knocked out Pearce.

I placed Miller under arrest for resisting without violence, violating Florida State Statute 843.20. Miller opposed my, Ofc. Gruba, lawful commands, while conducting an investigation. At the time, I, Ofc. Gruba, was engaged in the lawful execution of a legal duty. At the time of this offense, I, Ofc. Gruba, was an officer. At the time, Miller knew I, Ofc. Gruba, was an officer, due to my class B, Key West Police issued, uniform.

Miller did not sustain any serious injuries and did not want to be checked out by rescue.

I transported Miller to the Monroe County Detention Center and handed him over to detention deputies without incident.

During the foot pursuit my BWC fell off. I was not able to recover it until after I had Miller detained. There is in-car COBAN for this arrest.

End of report.

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## Incident Report Suspect List

Key West Police Department

OCA: 22-002977

<b>1</b>	Name (Last, First, Middle) <i>MILLER, TYLER EDWARD</i>						Also Known As				Home Address <i>10256 ALLAMANDA CIR PALM BEACH GARDENS, FL 33410 561-309-2175</i>			
	Business Address													
	DOB	Age	Race	Sex	Eth	Hgt	Wgt	Hair	Eye	Skin	Driver's License / State.			
	<i>05/18/2001</i>	<i>21</i>	<i>W</i>	<i>M</i>	<i>N</i>	<i>507</i>	<i>150</i>	<i>BLN</i>	<i>BLU</i>	<i>LGT</i>	<i>M460805011780 FL</i>			
Scars, Marks, Tattoos, or other distinguishing features														
<b>Reported Suspect Detail</b>														
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: 22-002977
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<b>1</b>	Property Description <b>BWC 4156</b>	Make	Model	Caliber
	Color	Serial No.	Value <b>\$0.00</b>	Qty <b>1.000</b>
	Status <b>Evidence</b>	Date <b>05/22/2022</b>	NIC #	Jurisdiction <b>Locally</b>
	Name (Last, First, Middle)		State #	Local #
			DOB	Age
			Race	Sex

Notes

<b>2</b>	Property Description <b>COBAN</b>	Make	Model	Caliber
	Color	Serial No.	Value <b>\$0.00</b>	Qty <b>1.000</b>
	Status <b>Evidence</b>	Date <b>05/22/2022</b>	NIC #	Jurisdiction <b>Locally</b>
	Name (Last, First, Middle)		State #	Local #
			DOB	Age
			Race	Sex

Notes