

# Response to Resistance Report

Key West Police Department

Case No: 22-5506

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: 09/24/2022 3. Time: 1940 4. Location: 1445 S. Roosevelt 5. Incident type: S34/S13P

INCIDENT  
6. Resistance Level 7. Explanation 8. Response Option 9. Explanation  
☒ Passive: Not obeying commands ☒ Physical Control Handcuffed  
☒ Active: Tensing ☐ Non-lethal Weapon  
☐ Aggressive: ☐ Deadly Force  
☐ Deadly Force:

10. Last Name: Gutierrez-Ruiz 11. First: Jose 12. Race: H 13. Sex: M

14. DOB: 12/30/2006 15. Height: 5.05 16. Weight: 115

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  
Abrasion  
22. Anterior View  
Posterior View

23. Officer: Erik Roberts 24. Race: W 25. Sex: M 26. Age: 32 27. Height: 6.01 28. Weight: 300

29. Duty Status: ☒ On-duty ☐ Off-duty ☐ Extra duty employment ☒ Uniformed ☐ Plain clothes 30. Yrs Exp: 11mo

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: Handcuffs

OFFICER  
35. Anterior View  
Posterior View

**Response to Resistance Report (continued)**

Key West Police Department

Case No: 22-5506

TASER USE ONLY	<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>														
REPORT	<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.													
SUPERVISOR'S INQUIRY	<b>40. Notified Date:</b> 09/24/2022 <b>41. Time:</b> 1940													
	<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 checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)													
	<b>46. Were you able to locate any independent witnesses:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes," list below)													
	<table border="1"><thead><tr><th>Name</th><th>Address</th><th>Phone Number</th></tr></thead><tbody><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr><tr><td> </td><td> </td><td> </td></tr></tbody></table>		Name	Address	Phone Number									
	Name	Address	Phone Number											
<b>47. Is further review recommended:</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes														
FORWARD COMPLETED ORIGINAL REPORT TO INTERNAL AFFAIRS														
<div>3755</div> <div>09/24/2022</div>														
INT. AFF.	<b>48. Preparing Supervisor's Signature / ID</b>													
	<b>49. Date</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													
<b>51. Signature of Internal Affairs Inspector</b>		<b>52. Date</b>												
<b>53. If section 48 is "No" record the Professional Standards Control Number:</b>		<b>54. Date Entered:</b>												

## INCIDENT DATA

PROPERTY

## INCIDENT/INVESTIGATION REPORT

Key West Police Department

Case # 22-005506

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), HANSELL, M. (3648), ROSCOE, R. (4011), BERNATOVA, A. (4193), ADORNO, S.D. (4155)*

Suspect Hate / Bias Motivated:

## INCIDENT/INVESTIGATION REPORT

Narr. (cont.) OCA: 22-005506

Key West Police Department

NARRATIVE
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**REPORTING OFFICER NARRATIVE***Key West Police Department*

OCA

22-005506

Victim

*COCONUT MALLORY*

Offense

*LOITERING AND PROWLING /CURFEW*

Date / Time Reported

*Sat 09/24/2022 19:30*

On Saturday 09/24/2022 at approximately 1937 hrs. I (Ofc. E. Roberts) responded to 1445 S. Roosevelt Blvd (Coconut Mallory Resort) reference a subject wearing a ski mask with a knife.

On arrival I observed Ofc. M. Hansell and Sgt. J. Conaty speaking with witnesses. They stated that a white male wearing a black ski mask and a white tank top was seen with a knife in his possession wandering the property of the resort. While taking statements from the reporting parties, Jose Gutierrez-Ruiz was identified as fitting the description of the subject in question. Ruiz was known to me from prior interaction. There was a black cloth in material object hanging from his right front pocket. I stopped Ruiz and asked him why he was in possession of a ski mask. I placed Ruiz in handcuff restraints and proceeded to ask if he was staying at the resort, to which he responded no. He also stated that he regularly wears a ski mask. When questioned if he had weapons in his possession, He stated that he had a pocket-knife in his pants.

Multiple guests stated that they witnessed Ruiz walking around with the blade of the knife open while wearing the ski mask.

I spoke with the property manager, Yenisey Eppy, who stated that she wished to pursue charges of Loitering or prowling (FS 856.021) due to the concern and fear caused to the guests of the resort by Ruiz's actions, as well as his lack of lawful reason to be present on the premises.

Due to the above stated facts I find probable cause that Jose Gutierrez-Ruiz did willingly and knowingly loiter or prowl in a place, under circumstances that warrant a justifiable and reasonable alarm or immediate concern for the safety of persons or property in the vicinity contrary to FS 856.021.

Ruiz was secured in my patrol car and transported to the Monroe County Detention Center.

I notified the Florida Department of Juvenile Justice of the Arrest at 2016 hrs. 09/24/2022.

Ruiz sustained an abrasion to his right shoulder while being placed in handcuff restraints.

Ofc. D. Slaunwhite notified Ruiz's mother, Carmen Ruiz of the arrest.

My Axon BWC was activated during this incident and uploaded to Evidence.com.

My Axon In-Car Recording System was activated during transport and uploaded to Evidence.com.

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# Incident Report Suspect List

Key West Police Department

OCA: 22-005506

1	Name (Last, First, Middle) <i>GUTIRREZ-RUIZ, JOSE ALBERTO</i>						Also Known As <i>RUIZ, JOSE ALBERTO</i>				Home Address <i>41 9TH AVE - B KEY WEST, FL 33040 305-922-0546</i>																																					
	Business Address <i>KWHS 305-296-5628 FRESHMAN</i>																																															
	DOB <i>12/30/2006</i>	Age <i>15</i>	Race <i>W</i>	Sex <i>M</i>	Eth <i>H</i>	Hgt <i>500</i>	Wgt <i>100</i>	Hair <i>BRO</i>	Eye <i>BRO</i>	Skin <i>LGT</i>	Driver's License / State. <i>G362421064700 FL</i>																																					
	Scars, Marks, Tattoos, or other distinguishing features <i>TAT OTHR OTHER / NONE</i>																																															
<table border="1"> <tr> <td colspan="2">Reported Suspect Detail</td> <td colspan="2">Suspect Age</td> <td>Race</td> <td>Sex</td> <td>Eth</td> <td>Height</td> <td colspan="2">Weight</td> <td colspan="2">SSN</td> </tr> <tr> <td>Weapon, Type</td> <td>Feature</td> <td colspan="2">Make</td> <td colspan="2">Model</td> <td>Color</td> <td>Caliber</td> <td colspan="2">Dir of Travel</td> <td colspan="2">Mode of Travel</td> </tr> <tr> <td colspan="2">VehYr/Make/Model</td> <td>Drs</td> <td colspan="2">Style</td> <td>Color</td> <td colspan="2">Lic/St</td> <td colspan="4">VIN</td> </tr> </table>													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			
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