

CHATTOOGA COUNTY S.O. - NIBRS INCIDENT REPORT

CASE NUMBER
2020-11-29401
CAD NUMBER

AGENCY ORI
GA0270000

PUBLIC COPY
INITIAL REPORT

Event						
INCIDENT LOCATION 71 Cottonwood St, Trion		STATE GA	ZIP 30753	ZONE A	Loc. Code TRION	
INCIDENT DATE 10/31/2020	TIME 18:22	TO DATE 10/31/2020	TIME 18:39	DAY OF THE WEEK (INCIDENT): SATURDAY		Description
WEATHER CONDITIONS CLEAR		DISCOVERED BY COMPLAINANT		CARGO THEFT INVOLVED? <input type="checkbox"/> Yes <input type="checkbox"/> No		

State/GCIC						
OCA	ACTION	PERSON	WARRANT	VEHICLE	ARTICLE	BOAT
<input type="checkbox"/>						
<input type="checkbox"/>						

Administration						
EVIDENCE COLLECTED?	<input type="checkbox"/> N	PHOTOS TAKEN?	<input type="checkbox"/> N	FOLLOW UP - PATROL?	<input type="checkbox"/> N	CLEARANCE DATE
PRINTS TAKEN?	<input type="checkbox"/> N	COMPLAINT UNFOUNDED?	<input type="checkbox"/> N	FOLLOW UP - DETECTIVES?	<input type="checkbox"/> Y	CASE STATUS
BIO./DNA EVIDENCE?	<input type="checkbox"/> N	WILLING TO PROSECUTE?	<input type="checkbox"/> U	RESPONSE CODE	<input type="checkbox"/>	TOTAL OFFENDERS
BODY CAMERA USE?	<input type="checkbox"/> N	IN CAR CAMERA USE?	<input type="checkbox"/> N	TASER USE?	<input type="checkbox"/>	
REPORT DATE/TIME	11/01/2020	13:50	COMPSTAT	<input type="checkbox"/>	REVIEWED BY	
REPORTING OFFICER	SO04	REBECCA FARMER		REVIEWED DATE		
APPROVING OFFICER	SO02	KEVIN WOODS		DIVISION ASSIGNED	ROAD PATROL	
APPROVED DATE	11/02/2020		ASSIGNED DATE	11/01/2020		
COMMANDING OFFICER		INVESTIGATOR ASSIGNED		ASSIGNED DATE		
APPROVED DATE						

Offense # 1			
OFFENSE STATUTE: 006	OFFENSE DESCRIPTION: DAMAGE TO PROPERTY	COUNTS: 1	OFFENSE STATUS: Completed
NIBRS OFFENSE CODE: 90Z	OFFENSE DESCRIPTION: All Other Offenses		
OFFENSE LOCATION: 20-Residence/Home	HATE CRIME: <input type="checkbox"/> Yes <input type="checkbox"/> No	Bias Motivations: (1) 88-None (No Bias)	
Drug Related? <input type="checkbox"/> Yes <input type="checkbox"/> No	Drug Type:	(2)	
		(3)	
		(4)	
		(5)	
Offender Suspected of Using: (Choose up to 3) <input type="checkbox"/> Alcohol <input type="checkbox"/> Drugs/Narcotics <input type="checkbox"/> Computer Equipment <input checked="" type="checkbox"/> Not Applicable		IF BURGLARY, METHOD OF ENTRY: (For Burglary Only) NUMBER OF PREMISES:	
Gang Related? <input type="checkbox"/> Yes <input type="checkbox"/> No	Gang Name:		
WEAPON TYPE/FORCE USED: (Can list up to 3)	AUTOMATIC WEAPON: (Can only be YES if firearm)	TYPE OF CRIMINAL ACTIVITY: (Can list up to 3)	
(1)	<input type="checkbox"/> Yes <input type="checkbox"/> No	(1)	
(2)	<input type="checkbox"/> Yes <input type="checkbox"/> No	(2)	
(3)	<input type="checkbox"/> Yes <input type="checkbox"/> No	(3)	

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Person #1

COMPLAINANT VICTIM WITNESS OFFENDER PRIMARY AGGRESSOR DEAD/UNIDENTIFIED UNKNOWN RETURNED OTHER

NAME

HEIGHT RACE

ADDRESS

WEIGHT ETHNICITY

CITY, ST, ZIP

HAIR SEX SSN

HOME PHONE CELL PHONE

EYES DOB AGE

EMAIL

RESIDENT STATUS

DRIVER'S LICENSE NUMBER

DRIVER'S LICENSE ISSUING STATE

RAPE VICTIM JUVENILE PUBLIC EMPLOYEE WANTED SUSPECT WARRANT ARRESTED MISSING SUICIDE VEHICLE PURSUIT

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Narrative

Type of Narrative	Reporting Officer	Statement Date	Statement Time
Narrative	So04 Rebecca Farmer		
<p>On 10/31/20 at approximately 1822 hrs, I was dispatched to 71 Cottonwood St in reference to damage to property. Upon my arrival, I spoke to the complainant, Tony Current. He advised that he noticed his shed was leaning and when he checked the inside, he found the wooden support braces missing. Mr. Current requested a report of the incident.</p>			