

CFS SUMMARY

CFS# 11-0001436				RECEIVED DATE/TIME 02-28-2011 19:03		INCIDENT NUMBER 11-0001436		
ACTIVITY DISORDERLY CONDUCT				INCIDENT DATE/TIME 02-28-2011 07:03 PM		OTHER CONTACTS		
DESCRIPTIVES	CALL ORIGIN TELEPHONE		RP/DS					
	DISPATCHER 125 - SANTANGELO, DISP. DAN							
	RESPONSE ROUTINE							
	DISPOSITION INCIDENT REPORT							
CALLER	NAME KRLICH, GARRICK				CALL BACK 330 5342949		PHONE	
	ADDRESS 713 EAST LIBERTY ST., HUBBARD, OH 44425							
LOCATION	ADDRESS 713 EAST LIBERTY ST., HUBBARD, OH 44425							
	LOCATION 713 EAST LIBERTY ST.					TOWNSHIP		
	GRID FIRST WARD				PATROL AREA SOUTHEAST RESIDENTIAL			
CALL DESCRIPTION	<p>CALLER REPORTS THAT A VEHICLE WITH DEALER'S PLATE DROVE PAST HIS RESIDENCE HONKING HIS HORN AND HE FOLLOWED IT TO GREENWOOD CHEVROLET TO OBTAIN THE REGISTRATION. CALLER REQUESTS TO SPEAK WITH AN OFFICER AT HIS RESIDENCE OF 713 EAST LIBERTY ST. OFFICER SPOKE WITH CALLER AT HIS RESIDENCE AND CONTACTED GREENWOOD CHEVROLET VIA. PUBLIC SERVICE. GREENWOOD EMPLOYEES ADVISED THAT THERE WERE NO VEHICLES OUT FOR TEST DRIVE, ETC... SUSPECT IDENTIFIED AS, TODD R. CHUEY (RR302807), SUBJECT ISSUED SUMMONS FOR HORN BLOWING, PLEASE SEE INCIDENT REPORT.</p>							
DISPATCHED UNITS	AGENCY	UNIT	OFFICER	DISPATCH	ENROUTE	ONSCENE	CLEAR	MINUTES
	HPD	147	PORTER, JOHN C.	19:04	19:04	19:11	19:33	29
	HPD	095	THIRION, PTL. TED	19:20	19:20	19:20	19:33	13

ADMINISTRATIVE	AGENCY NAME Hubbard Police Department				Printed: 03-04-2011 18:23				*INCIDENT NUMBER-INVESTIGATIVE NUMBER 11-0001436																																																																																																																																																																																																																																																																																																											
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	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. _____ 2. _____ RESIDENTIAL STRUCTURE 01 Single Family Home 02 Multiple Dwelling 03 Residential Facility 04 Other Residential 05 Garage/Shed PUBLIC ACCESS BLDGS. 06 Transit Facility 07 Government Office 08 School 09 College 10 Church 11 Hospital </div> <div style="width: 45%;"> COMMERCIAL LOCATIONS 12 Jail/Prison 13 Parking Garage 14 Other Public Access Buildings 15 Auto Shop 16 Financial Institution 17 Barber/Beauty Shop 18 Hotel/Motel 19 Dry Cleaners/Laundry 20 Professional Office 21 Doctor's Office 22 Other Business Office 23 Amusement Center 24 Rental Storage Facility 25 Other Commercial Service RETAIL 26 Bar 27 Buy/Sell/Trade Shop 28 Restaurant 29 Gas Station 30 Auto Sales Lot 31 Jewelry Store 32 Clothing Store 33 Drugstore 34 Liquor Store 35 Shopping Mall 36 Sporting Goods 37 Grocery/Supermarket 38 Variety/Convenience 39 Department Store OUTSIDE 40 Other Retail Store 41 Factory/Mill/Plant 42 Other Building 43 Yard 44 Construction Site 45 Lake/Waterway 46 Fields/Woods 47 Street 48 Parking Lot 49 Park/Playground 50 Cemetery 51 Public Transit Vehicle 52 Other Outside Location 77 Other </div> </div>																																																																																																																																																																																																																																																																																																																			
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ADDITIONAL SUPPLEMENTS		<input type="checkbox"/> VICTIM/WITNESS		<input type="checkbox"/> PROPERTY		<input type="checkbox"/> STATEMENTS		FORM RECEIVED BY:		<input type="checkbox"/> INTELLIGENCE		SPECIAL COPIES																																																																																																																																																																																																																																																																																																								
		<input checked="" type="checkbox"/> SUSPECT/ARRESTEE		<input checked="" type="checkbox"/> NARRATIVE		<input type="checkbox"/> OTHER		<input type="checkbox"/> INVESTIGATION		<input type="checkbox"/> RECORDS																																																																																																																																																																																																																																																																																																										

 INCIDENT NUMBER
11-0001436

INCIDENT REPORT - PART 2

OFFENSE		INCIDENT NUMBER	
		11-0001436	
		INCIDENT DATE/TIME	
		02-28-2011 19:03	
REPORTER	NO. 1	NAME (Last, First, Middle) KRLICH, GARRICK	
	ADDRESS (Street, Apt., City, State, Zip) 713 EAST LIBERTY ST., HUBBARD, OH 44425		PHONE
	EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)		PHONE
	<input type="checkbox"/> STATEMENTS OBTAINED TYPE <input type="checkbox"/> WRITTEN <input type="checkbox"/> ORAL <input type="checkbox"/> TAPED <input type="checkbox"/> OTHER		
VEHICLE	CHECK CATEGORIES <input type="checkbox"/> STOLEN <input type="checkbox"/> RECOVERED <input type="checkbox"/> IMPOUNDED <input type="checkbox"/> RECEIVED <input checked="" type="checkbox"/> SUSPECT'S VEHICLE <input type="checkbox"/> VICTIM'S VEHICLE <input type="checkbox"/> UNAUTH. USE <input type="checkbox"/> ABANDONED		
	NO. 1	<input type="checkbox"/> DAMAGE TO VEHICLE <input type="checkbox"/> THEFT FROM VEHICLE	LIC NONE LIS OH LIY LIT VIN/OAN *VALUE \$
	YVR	VMA CHEVY VMO 36 VST BLAZ VCO TOP BOTTOM RED	<input type="checkbox"/> VEHICLE LOCKED <input type="checkbox"/> KEYS IN VEHICLE <input type="checkbox"/> HOLD VEHICLE <input type="checkbox"/> RELEASE CONTENTS
	VEHICLE ASSOC W/ SUSPECT #	VEHICLE ASSOC W/ VICTIM #	<input type="checkbox"/> VEHICLE TOWED TOWED BY OWNERSHIP VERIFIED BY: <input type="checkbox"/> TAG RECEIPT <input type="checkbox"/> TITLE <input type="checkbox"/> BILL OF SALE <input type="checkbox"/> OTHER
	STOLEN MOTOR VEHICLE ONLY	NO. STOLEN	AREA STOLEN: <input type="checkbox"/> RESID. <input type="checkbox"/> BUSINESS <input type="checkbox"/> RURAL ADDITIONAL DESCRIPTION SS
	AUTO INSURANCE NAME (Company) ADDRESS (Street, City, State, Zip) PHONE		
	MOTOR VEHICLE RECOVERY ONLY	NO. RECOVERED 1	DATE RECOVERED <input type="checkbox"/> STOLEN IN YOUR JURISDICTION WHERE RECOVERED?
	*TYPE PROPERTY LOSS (Enter Code Below) 1 NONE 2 BURNED 3 COUNTERFEITED/FORGED 4 DESTROYED/DAMAGED/VANDALIZED 5 STOLEN/ECT. 6 SEIZED 7 RECOVERED U UNKNOWN P PHOTO E EVIDENCE TOTAL VALUE		
	*LOSS CODE	QUANTITY	DESCRIPTION *PROP CODE *VALUE
	VICT. NO	VEH. NO	MAKE/BRAND MAKE/BRAND DATE RECOVERED
SERIAL NUMBER NCIC NUMBER OTHER NUMBER			
*LOSS CODE QUANTITY DESCRIPTION *PROP CODE *VALUE			
VICT. NO	VEH. NO	MAKE/BRAND MAKE/BRAND DATE RECOVERED	
SERIAL NUMBER NCIC NUMBER OTHER NUMBER			
*LOSS CODE QUANTITY DESCRIPTION *PROP CODE *VALUE			
VICT. NO	VEH. NO	MAKE/BRAND MAKE/BRAND DATE RECOVERED	
SERIAL NUMBER NCIC NUMBER OTHER NUMBER			
PROPERTY CODES: EXCHANGE MEDIUMS 01 Money 02 Credit/Debit Card 03 Negotiable Instruments 04 Other Exchange Mediums 05 Non-Negotiable Instruments 06 Personal Papers 07 Other Documents VALUABLES 08 Jewelry/Precious Metals 09 Art Objects, Antiques 10 Other Valuables PERSONAL EFFECTS 11 Clothing/Furs 12 Purses/Handbags/Wallets 13 Other Personal Effects HOUSHOLD ITEMS 14 Household Items EQUIPMENT 15 Drug/Narcotic Equip. 16 Gambling Equipment 17 Computer Hardware/Soft. 18 Office Equipment 19 Stereo TV Equipment 20 Recordings - Audio Vis. 21 Sports Equipment 22 Photographic Equipment 23 Farm Equipment 24 Heavy Contruction 25 Building Supplies 26 Tools 27 Vehicle Parts/Acces. 28 School Supplies 29 Other Equipment CONSUMABLE ITEMS 30 Alcohol 31 Drugs/Narcotics 32 Consumable Goods ANIMALS 33 Livestock 34 Household Pets VEHICLES 35 Aircraft 36 Automobiles 37 Bicycles 38 Buses 39 Trucks 40 Trailers 41 Watercraft 42 Recreational Veh. 43 Other Motor Veh WEAPONS 44 Firearms 45 Other Weapons STRUCTURES 46 Single Occupancy 47 Other Dwellings 48 Commercial/Bus 49 Indus./Mfg. 50 Public/Comm. 51 Storage 52 Other Structure OTHER 53 Merchandise 54 Other Property 55 Pending Inventory			
NARRATIVE	THE R/O WAS DISPATCHED TO THIS ADDRESS TO INVESTIGATE A REPORT OF A HORN BLOWING INCIDENT.		

SUSPECT / ARREST SUPPLEMENT

ARRESTING AGENCY Hubbard Police Department		INCIDENT NUMBER 11-0001436	
VICTIM KRLICH, GARRICK		INCIDENT DATE/TIME 02-28-2011 19:03	
NO. 1 <input checked="" type="checkbox"/> ADULT <input type="checkbox"/> JUVENILE CHECK APPROPRIATE CATEGORY <input checked="" type="checkbox"/> SUSPECT <input type="checkbox"/> ARRESTEE <input type="checkbox"/> SUSPECT/ARRESTEE <input type="checkbox"/> RUNAWAY <input type="checkbox"/> MISSING <input type="checkbox"/> OTHER <input type="checkbox"/> CHARGES FILED			
NAME (Last, First, Middle) CHUEY TODD R.			
ALIASES		GANG AFFILIATION	
ADDRESS (Street, Apt., City, State, Zip) 7344 OAKCREST DR, HUBBARD, OH 44425			PHONE
EMPLOYER NAME AND ADDRESS (Street, Apt., City, State, Zip)			PHONE
PLACE OF BIRTH		D.L.#/STATE	OCCUPATION/SCHOOL
*AGE/ D.O.B. 40 - 40 /		*SEX M	*RACE <input checked="" type="checkbox"/> W <input type="checkbox"/> B <input type="checkbox"/> A <input type="checkbox"/> I <input type="checkbox"/> U
		*HEIGHT 606	*WEIGHT 250
		HAIR BRO	EYES BLU
MARITAL STATUS			
SCARS, MARKS, TATTOOS			
ADDITIONAL DESCRIPTIVES			
SUSPECTED OF USING <input type="checkbox"/> ALCOHOL <input type="checkbox"/> DRUGS			
POTENTIAL INJURIES?			
*RESIDENT STATUS <input type="checkbox"/> 1. RESIDENT <input type="checkbox"/> 2. TOURIST <input type="checkbox"/> 3. MILITARY <input type="checkbox"/> 4. STUDENT <input type="checkbox"/> 5. OTHER (Explain) <input type="checkbox"/> 6. UNKNOWN			
*ARRESTEE WAS ARMED WITH			
ARRESTEE ARMED WITH 1. 2. 3. 99 NONE 13B OTHER FULLY AUTOMATIC FIREARM 16 IMITATION FIREARM 50 POISON 11 FIREARM 14 SHOTGUN 17 SIMULATED FIREARM 60 EXPLOSIVES 12 HANDGUN 15 OTHER FIREARM 18 BB/PELLET GUN 65 FIRE/INCENDIARY DEVICE 12A AUTOMATIC HANDGUN 15A SEMI-AUTOMATIC SPORTING RIFLE 20 KNIFE/CUTTING INSTRUMENT 70 DRUGS/NARCS/SLEEPING PILLS 13 RIFLE 15B SEMI-AUTOMATIC ASSAULT FIREARM 30 BLUNT OBJECT 80 OTHER WEAPON 13A FULLY AUTOMATIC 15C MACHINE PISTOL 35 MOTOR VEHICLE U UNKNOWN 40 PERSONAL WEAPON			
NAME		ADDRESS (Street, Apt., City, State, Zip)	
1.		1.	
2.		2.	
Phone		Phone	
1.		1.	
2.		2.	
*ARREST/OFFENSE DESCRIPTION		*ARREST/OFFENSE CODE	*F/M & DEGREE
1.		1.	1.
2.		2.	2.
3.		3.	3.
4.		4.	4.
5.		5.	5.
*ARREST DATE		TIME	ARREST LOCATION (Street, Apt., City, State, Zip)
*INCIDENT TRACKING NUMBER		*ARREST DISPOSITION	
MIRANDA WITNESSED BY:		BAIL	
TIME READ			
<input type="checkbox"/> FINGERPRINTED FINGERPRINT CARD NO.		<input type="checkbox"/> PHOTOS TAKEN NO. TAKEN	PHOTO ID NO.
<input type="checkbox"/> COUNT ARRESTEE <input type="checkbox"/> MULTIPLE INDICATOR <input type="checkbox"/> N/A		*ARREST TYPE <input type="checkbox"/> IN PROGRESS <input type="checkbox"/> SUMMONS <input type="checkbox"/> OTHER <input type="checkbox"/> COMPLAINANT <input type="checkbox"/> WARRANT <input type="checkbox"/> ORDER OF PROTECTION	
<input type="checkbox"/> JUV. PARENT/ GAURDIAN NOTIFIED		DATE/TIME NOTIFIED	NOTIFIED BY
PARENT/GAURDIAN NAME AND ADDRESS (Street, Apt., City, State, Zip)		RELATIONSHIP	PHONE
PARENT/GAURDIAN NAME AND ADDRESS (Street, Apt., City, State, Zip)		RELATIONSHIP	PHONE
<input type="checkbox"/> PREVIOUS RUNNAWAY/ MISSING		DATE OF LAST CONTACT	DATE OF EMANCIPATION
LAST SEEN WEARING		NCIC#	DATE/TIME ENTERED
REPORTING OFFICER/ARRESTING OFFICER PORTER, JOHN C.		BADGE NO. 147	DATE 02-28-2011
APPROVING OFFICER		BADGE NO.	DATE
COURT		COURT DATE	

NAME/DESCRIPTIVES

ASSOC. PERSONS

ARREST INFORMATION

JUVENILE

RUNAWAYS / MISSING

NARRATIVE SUPPLEMENT

Investigative Narrative <input type="checkbox"/>		INCIDENT NUMBER 11-0001436
VICTIM KRLICH, GARRICK	OFFENSE	INCIDENT DATE/TIME 02-28-2011 19:03
<p>THE R/O ARRIVED AND SPOKE WITH MR. KRLICH WHO STATED THAT HE TAPED A HORN BLOWING INCIDENT AT THE INTERSECTION OF CREED AVE AND E. LIBERTY ST. HE ALSO STATES THAT HE FOLLOWED THE VEHICLE A LATE MODEL RED CHEVY TRAILBLAZER SS WITHOUT LICENSE PLATES, WEST ON EAST LIBERTY ST AND THEN NORTH ON NORTH MAIN ST AND THEN CONTINUED TO GREENWOOD CHEVROLET. HE STATES THAT HE WITNESSED THE DRIVER, TOD CHUEY, AND DESCRIBED THE DRIVER, HEIGHT ESTIMATED AT 6'6" 250 LBS. WHITE MALE EXIT THE VEHICLE AND GO INTO THE DEALERSHIP. MR. KRLICH ALSO STATES THAT HE NOTED THE VEHICLE OWNERS NAME FROM A DOCUMENT LOCATED IN THE VEHICLE. PTL. THEIRON FOLLOWED UP WITH ALL AVAILABLE INFORMATION FROM THE DEALERSHIP, CONFIRMED THE INFO AND RELAYED IT TO THE R/O. THE R/O THEN CLEARED.</p>		
REASON CLEARED <input type="checkbox"/> DEATH OF OFFENDER <input type="checkbox"/> PROSECUTION DECLINED <input type="checkbox"/> EXTRADITION DENIED		<input type="checkbox"/> VICTIM REFUSED TO COORP. <input type="checkbox"/> JUVENILE/NO CUSTODY <input type="checkbox"/> ARREST - ADULT
<input type="checkbox"/> ARREST - JUVENILE <input type="checkbox"/> WARRANT ISSUED <input type="checkbox"/> INVEST. PENDING		<input checked="" type="checkbox"/> CLOSED <input type="checkbox"/> UNFOUNDED <input type="checkbox"/> INVEST. PENDING
REPORTING OFFICER PORTER, JOHN C.		DATE CLEARED 02-28-2011
APPROVING OFFICER		DATE 02-28-2011

NARRATIVE SUPPLEMENT

Investigative Narrative ☐

INCIDENT NUMBER

11-0001436

VICTIM

KRLICH, GARRICK

OFFENSE

INCIDENT DATE/TIME

02-28-2011 19:03

THE SUSPECT TOD CHUEY WAS SERVED PERSONALLY WITH A MM SUMMONS BY THE R/O AT 2106 HOURS THIS DATE AT HIS RESIDENCE. THE R/O THEN CLEARED.

REASON CLEARED

☐ DEATH OF OFFENDER

☐ VICTIM REFUSED TO COORP.

☐ ARREST - JUVENILE

☒ CLOSED

DATE CLEARED

☐ PROSECUTION DECLINED

☐ JUVENILE/NO CUSTODY

☐ WARRANT ISSUED

☐ UNFOUNDED

02-28-2011

☐ EXTRADITION DENIED

☐ ARREST - ADULT

☐ INVEST. PENDING

☐ INVEST. PENDING

REPORTING OFFICER

PORTER, JOHN C.

BADGE NO.

DATE

02-28-2011

APPROVING OFFICER

BADGE NO.

DATE

[illegible]

[illegible]