

USE OF FORCE AND CONDUCTED ENERGY WEAPON (CEW) REPORT

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INCIDENT TYPE: Date/Time: Location: Beat: Subject's Name (Last, First, Middle): DOB: Occupation ("Unemployed" if none, school name if juvenile): Sex: Ethnicity: Height: Weight: Build: Clothing Description:

NATURE OF INITIAL CONTACT: Traffic Violation Field Interview Misc. Assist Prisoner Transport Sent to Investigate case Arrest Warrant Follow-up On Beat Other: Important Information Known Before or Upon Arrival:

OFFICER IDENTIFICATION (Check all that apply): Uniform (describe): Verbal Nonuniform/Badge Nonuniform/Marked Clothing (describe): Vehicle: None Police White Car Subsidized (blue light) Solo Bike Bicycle Other:

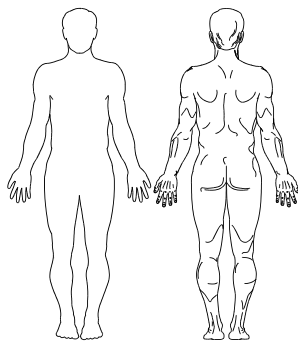
SUBJECT'S RESPONSE TO OFFICER'S ARRIVAL: No Response Complied with Directions Took Evasive Action/Fled Stopped Action Hid Took Aggressive Action Called Officer by Title or Slang: Other:

SUBJECT'S ACTIONS (All Resistance Encountered): Psychological Intimidation (describe) Verbal Noncompliance (describe) Passive Resistance (describe) Defensive Resistance (describe) Active Resistance (describe) Active Aggression (describe) Aggravated Active Aggression (describe) OFFICER'S RESPONSE (All Control Effected): Verbal Command: Asking Setting Context Ordering Giving Options Confirmation Other: Effective: YES / NO Physical Contact: Touch Escort Lt Pressure Point Lt. Joint Lock Other: Effective: YES / NO Chemical Agent: OC CS CN Pepperball Display Only Used Comment: Effective: YES / NO Number of Sprays: Physical Confrontation: Hand/Arm strike Foot/Leg strike Head Lock Joint Lock Physical Strength Technique Other: Effective: YES / NO Intermediate Weapon: Display Baton only Baton Strike Baton Jab Canine Other: 12 ga. Less Lethal Display Only Deployed CEW Taser 7 (COMPLETE CEW USE SECTION BELOW) Effective: YES / NO Deadly Force: Handgun Rifle Shotgun Unholstered precautionary only Unholstered, subject present, not fired Fired, not at subject: Explain: Fired at subject Other: Effective: YES / NO

FOR CEW USE ONLY (if none used, then skip to DURATION OF RESISTANCE)

Usage (check one): Display Only Display Only with Warning ARC CEW Application CEW Serial #: Air Cartridge Type(s): Close Quarters 12-Degree Standoff 3.5-Degree Is This a Dart Probe Contact: YES / NO Is This a Drive Stun Contact: YES / NO Probe Follow-up: YES / NO NMI (check one): FULL NMI PARTIAL NMI INEFFECTIVE Number of Air Cartridges Fired: Number of Cycles Applied: Subject Wearing Heavy or Loose Clothing: YES / NO Did Probes Penetrate the Subject's Skin: YES / NO Probes Removed on Scene: YES / NO Need for Additional Applications: YES / NO Approximate Target Distance at the Time of the Probe Deployment: feet Approximate Location Between the Two Probes: inches Did the CEW Application Cause Injury: YES / NO If YES, Was the Subject Treated for the Injury: YES / NO DESCRIPTION OF INJURY: Describe the Subject's Demeanor After the Device was Used or Displayed: CEW Downloaded: YES / NO By Whom: Date/Time: If Not Downloaded, Explain Why: Firing Record(s) Submitted: YES / NO

APPLICATION AREAS
 (Place "X's" where probes hit subject AND "O's" where stunned)



COMMENTS

DURATION OF RESISTANCE Less than 30 sec. 30 sec. – 1 min. 1-2 min. 2-4 min. Other: _____

CONDITIONS (Check all that apply)

Approximate Number of Subjects in Area: _____ Approximate Number of Who Resisted or Assaulted Officers: _____
 Approximate Number of Bystanders: _____ Approximate Number of Officers Present: _____

Alcohol Used Drugs Used Suspected Alcohol Use Suspected Drug Use Known to Resist or Assault Subject Size
 Great Anger Great Fear Great Strength Threatening Fighting Skill/Martial Arts Officer Injury/Exhaustion
 Mentally Deranged Gang Member Gang Associate Hostile Bystanders Potential Ambush Foot Pursuit
 Close Proximity to Officer's Weapon Weapons in Area Violent Crime Vehicle Traffic Vehicle Pursuit
 Other (explain): _____

RESTRAINTS USED

Handcuffs Flex Cuff Leg Irons Other: _____
 Complaint of Tightness/Pain Action Taken: Checked & OK Checked & Adjusted Reason: _____
 Escape/Attempt Restraint Removed Handcuffs Moved to the Front Reason: _____

INJURIES

Subject Upon Arrival	Subject As a Result of Force	Officer
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No Injury Observed, None Reported When Asked
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No Injury Observed, but Complained of Injury
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Bodily Injury
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Substantial Bodily Injury
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Serious Bodily Injury
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Death

(*If subject and officer had none, skip to "SUBJECT TRANSPORT")

Describe, Including Cause: _____
 (Subject) _____
 (Officer) _____

Treatment: _____

Disposition of Photograph(s): _____
 Photographs: YES / NO Photographer (name): _____
 Submitted Into Evidence Attached to Key Report Attached to Arrest Report

SUBJECT TRANSPORT

Cooperative Threats Challenges Screaming Kicking Spitting
 Hitting Head Obscene Language Attempts to Escape Other: _____
 Sitting Lying on Side Lying on Back Other: _____
 Police Vehicle No.: _____ Paddy Wagon Ambulance Other: _____
 By Whom: _____ ID No. _____ Date/Time Transported: _____
 Date/Time Arrived: _____ Destination: _____

COMMENTS

Refer to the Use of Force in my report.

OFFICER INFORMATION	ID Number	Date/Time	Approved By	ID Number
Writer				

Submit with the Incident Report