

# OFFENSE-INCIDENT REPORT

Agency Code **30** Gang Related  In Report  Juvenile Warn/Dismiss  1. Original  2. Supplement

ADMI Date of Supplement **MIAMI-DADE POLICE DEPARTMENT** Agency Report Number **P 2 1 4 1 0 1 3 3 7 3 4 6 7**

Original Day Reported **MON 1 0 1 3 2 0 1 4** Time (mil) **0 0 3 7** Time Dispatched (mil) **0 0 3 8** Time Arrived (mil) **0 0 4 1** Time Completed (mil) **0 1 2 1**

Incident Type 1. Felony Traffic Misdemeanor 2. Traffic Misdemeanor 3. Misdemeanor 4. Traffic Misdemeanor 5. Ordinance 9. Other Incident: Day **10-13-2014** Time (mil) **0 0 3 7** Day **MON** Date **10-13-2014** To **---** Time (mil) **---**

OFF/INC # **1** Type **9** Description **DOMESTIC DISPUTE** A-Attempted  C-Committed  Statute Violation Number **7** NCC/CP Code **0086**

Incident Location (Street, Apt. Number) **941 NW 97 AVE # 104** City **MIAMI, FL** Zip **33172** District **NW 1238** Area **02** Zone **---**

Business Name/Area Identifier **RESIDENCE** Forced Entry 0. N/A 1. Yes 2. No 0 Occupancy 0. N/A 1. Occupied 2. Unoccupied 3. Abandoned 0

Location Type 01. Residence-Single 02. Apartment/Condo 03. Residence-Other 04. Hotel/Motel 05. Convenience Store 06. Gas Station 07. Liquor Sales 08. Bar/Nightclub 09. Supermarket 10. Dept/Discount Store 11. Specialty Store 12. Drug Store/Hospital 13. Bank/Financial Inst. 14. Commercial/Office Bldg. 15. Industrial/Mfg. 16. Storage 17. Gov't/Public Bldg. 18. School/University 19. Jail/Prison 20. Religious Bldg. 21. Airport 22. Bus/Rail Terminal 23. Construction Site 24. Other Structure 25. Parking Lot/Garage 26. Highway/Roadway 27. Park/Woodlands/Field 28. Lake/Waterway 29. Motor Vehicle 30. Other Mobile 99. Other **101**

# OFF/INC. **01** # Victims **00** # Offenders **00** # Prem. Ent. **000** # Veh. Stolen **000** Type Weapon 00. N/A 01. Handgun 02. Rifle 03. Shotgun 04. Firearm 05. Knife/Cutting Instrument 06. Blunt Object 07. Hands/Fist/Feet 08. Poison 09. Explosives 10. Fire/Incendiary 11. Threat/Intimidation 12. Simulated Weapon 13. Drugs 88. Unknown 99. Other **00**

V/W Code V-Victim P-Proprietor W-Witness C-Reporting Person Victim Type 0. N/A 1. Juvenile 2. L.E. Officer 3. Adult 4. Business 5. Government 6. Church 9. Other Race N-N/A W-White B-Black I-American Indian O-Oriental/Asian U-Unknown Sex N-N/A M-Male F-Female U-Unknown Residence Type 0. N/A 1. City 2. County 3. Florida 4. Out-of-State Residence Status 0. N/A 1. Full Year 2. Part Year 3. Non-Resident Extent of Injury 0. None 1. Minor 2. Serious 3. Fatal

INJURY Type 00. N/A 01. Gunshot 02. Stabbed 03. Laceration 04. Unconscious 05. Poss. Broken Bones 06. Poss. Internal Injury 07. Loss of Teeth 08. Burns 09. Abrasions/Bruises 99. Other Victim Relationship To Offender 00. N/A 01. Undetermined 02. Stranger 03. Spouse 04. Ex-Spouse 05. Co-Habitant 06. Parent 07. Brother/Sister 08. Child 09. Step-Parent 10. Step-Child 11. In-Law 12. Other Family 13. Student 14. Teacher 15. Child of Boy/Girl Friend 16. Boy/Girl Friend 17. Friend 18. Neighbor 19. Sitter/Day Care 20. Employee 21. Employer 22. Landlord/Tenant 23. Acquaintance 99. Other Known

OFF/INC Indicator 1. #1 2. #2 3. Both **1** V/W Code **C 1 1 3** V. Type **3** Name (Last, First, Middle or Business) **ALVAREZ, ALEX** Address (Street, Apt. Number) **941 NW 97 AVE # 104** City **MIAMI** State **FL** Zip **33172** Synopsis of Involvement **BOYFRIEND OF C-2**

# V/W Code **W** Race **M** Sex **M** Date of Birth or Age **0 4 2 9 1 9 9 2** Res. Type **0 2** Res. Status **0 1** Extent of Injury **0 0** Injury Type(s) **0 0** Relationship **0 0** Ethnicity **---** Will victim prefer charges?  Yes  No

OFF/INC Indicator 1. #1 2. #2 3. Both **1** V/W Code **C 1 2 3** V. Type **3** Name (Last, First, Middle or Business) **PEREZ, PRISCILLA** Address (Street, Apt. Number) **941 NW 97 AVE # 104** City **MIAMI** State **FL** Zip **33172** Synopsis of Involvement **GIRLFRIEND OF C-1**

# V/W Code **W** Race **F** Sex **F** Date of Birth or Age **0 7 1 1 1 9 9 2** Res. Type **0 2** Res. Status **0 1** Extent of Injury **0 0** Injury Type(s) **0 0** Relationship **0 0** Ethnicity **---** Will victim prefer charges?  Yes  No

OFF/INC Indicator 1. #1 2. #2 3. Both **---** Suspect Code S-Suspect A-Arrestee E-Escapee Z-Other **---** Code # **---** Juvenile **---** Name (Last, First, Middle) **---** Maiden Name **---** Nickname/Street Name **---** Place of Birth **---** Residence Phone **---**

Last Known Address (Street, Apt. Number) **---** City **---** State **---** Zip **---** Business Phone **---** Occupation **---** Employer/School **---** Address **---** Social Security Number **---** Driver's License State/Number **---** Immigration and Naturalization Number **---** Other I.D. Number **---** OBTS Number (Arrested) **---** FCIC/NCIC **---** Clothing (Describe) **---** Scars/Marks/Tattoos (Location/Describe) **---** Hair Style **---**

RACE **---** SEX **---** DATE OF BIRTH OR AGE **---** HEIGHT **---** WEIGHT **---** EYE COLOR **---** HAIR COLOR **---** HAIR LENGTH **---** COMPLEXION **---** BUILD **---** FACIAL HAIR **---** TEETH **---** SPEECH/VOICE **---** SPECIAL IDENTIFIERS **---**

NARRATIVE **C-1 AND C-2 HAVE BEEN DATING FOR ABOUT A YEAR AND CURRENTLY LIVE TOGETHER. ON ABOVE LISTED DATE, C-1 AND C-2 WERE INVOLVED IN A VERBAL DISPUTE REFERENCE PERSONAL PROBLEMS WITHIN THEIR RELATIONSHIP. C-1 TOLD THIS UNIT THAT HE WOULD LEAVE THE RESIDENCE FOR THE NIGHT. DV PAMPHLET AND C/L ISSUED. (NO SIGN OF PHYSICAL CONTACT)**

Person/Unit Notified **---** Time **---** Related Report Number(s) **---** Officer(s) Reporting **M. TIRADO / J. PEREZ** I.D. Number(s) **4472 / 7336** Unit **D1503** Agency Code **30**

Case Status **EC** Clearance Type 1. Arrest 2. Exceptional 3. Unfounded 4. Open Pend. 5. Adult 6. Juvenile 7. Death of Offender 8. V/W Refused to Cooperate 9. Prosecution Declined 10. Juvenile/No Custody 11. Other **---** OBTS Number **---** Page **1** of **1**