

INCIDENT/INVESTIGATION REPORT

Agency Name
Troutman Police Department

ORI
NC0490400

Incident Number
0451-20

Date / Time Reported S M T W T F S
 Month Day Yr Time
 04 22 2020 0:46 Hrs

INCIDENT DATA

#1	Crime / Incident(s) 290 - INJURY TO REAL PROPERTY	<input type="checkbox"/> Attempt <input checked="" type="checkbox"/> Complete	At Found Month Day Yr Time 04 22 2020 0:46 Hrs	Last Known Secure Month Day Yr Time 04 22 2020 0:45 Hrs	
#2	Crime Incident	<input type="checkbox"/> Attempt <input type="checkbox"/> Complete	Location of Incident [REDACTED] TROUTMAN, NC 28166		Offense Tract
#3	Crime Incident	<input type="checkbox"/> Attempt <input type="checkbox"/> Complete	Location/Premise 20 - Residence/Home		Victim Residence Type <input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi Family

MO

How Attacked or Committed
FEMALE KICKED OPEN BEDROOM DOOR, BREAKING FRAME AND DOOR

Method Of Entry Force No Force

Weapon / Tools

VICTIM

of Victims: 1

Type: Person Business
 Society Government Financial Institute
 Religious L.E. Officer Line of Duty Other/Unk

Injury: None Minor Loss of Teeth
 Broken Bones Severe Lacerations
 Internal Unconscious Other Major

Drug/Alcohol Use: Yes Unknown No

V1
Victim/Business Name (Last, First, Middle): KIRK, JONATHAN LYNDALE

Victim of Crime #: 1 | DOB / Age: 12/22/1991 | 28 | Race: B | Sex: M

Relationship To Offender: Resident Non-Resident Unknown

Home Address: [REDACTED] TROUTMAN, NC 28166

Home Phone: _____

Employer Name/Address: SELF EMPLOYED

Business Phone: _____

VYR: _____ Make: _____ Model: _____ Style: _____ Color: _____ Lic/Lis: _____ Vin: _____

OTHERS INVOLVED

CODES: V = Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address: _____ Home Phone: _____

Employer Name/Address: _____ Business Phone: _____

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address: _____ Home Phone: _____

Employer Name/Address: _____ Business Phone: _____



Status Codes: 1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown
 (Check "OJ" column if recovered for other jurisdiction)

PROPERTY

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
1	29	4	1000.00		1	DOOR AND FRAME		

ID	Officer Name Sergeant Jamie Bengé	ID# 507	Officer Signature	Supervisor Signature
STATUS	Complainant Signature	Case Status <input type="checkbox"/> Active <input type="checkbox"/> Inactive <input type="checkbox"/> Closed by Arrest <input type="checkbox"/> Unfounded <input type="checkbox"/> Closed by Exception <input type="checkbox"/> Located (Missing Person and Runaways only) <input checked="" type="checkbox"/> Closed by Other Means		Exceptional Clearance: <input type="checkbox"/> Death of Offender <input type="checkbox"/> Juvenile/No Custody <input type="checkbox"/> Prosecution Declined <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> In Custody of Other Jurisdiction <input type="checkbox"/> Victim Refuse to Cooperate

