

Lincoln Police Department

Response to Resistance Form

Discharge of Weapon Form (animal)

The Response to resistance report will be completed any time deadly or non-deadly force is used in the performance of an officer's duties as outlined in General Order 2.1. It will also be completed for any animal destruction, accidental firearms discharge, or display of firearm where no other force was used.

Response to Resistance Incident Details

Local Report # _____ Date of Incident: _____ Time of Incident: _____

Location of Incident: _____ Nature of Original Call: _____

Officer Filing Report: _____

Primary Assignment at Time of Incident:

Supervisor on Duty: _____

Uniform/Marked Car

Plain Clothes/Marked Car

Supervisor Witnessed Incident: Yes No

Uniform/Plain Car

Plain Clothes/Unmarked

Supervisor Authorized Use of Force: Yes No

Special _____

Car

Other Officers Present at Incident:

Other Witnesses Present at Incident: _____

(List Names and Phone #)

Statements Obtained from Witnesses: Yes No (If Yes, Attach Statements to the Report)

Chief Notified: Yes No Date / Time Notified: _____ By Whom: _____

Type of Response Utilized (May Check More Than One)

Display of Firearm / Pointing at Suspects

Use of Firearm

Reason for Display or Use:

Arrest Situation

Assisting Other Officer

Safety/Self Defense

Other _____

Accidental Firearm Discharge

Hard Controls (Strikes, Take-downs)

Use of Non-Lethal (Circle: ASP Mace Taser)

Striking Structural Areas (Area Struck: _____)

Deadly Force

Use of Vehicle

Other _____

If firearm was utilized, list information:

Duty Weapon Off-Duty Weapon

Make: _____

Model: _____

Serial #: _____

Animal Destruction

Use Non-Lethal Weapons on Animal

Reason for Destruction or Use on Animal:

Vicious

Injured Type Injury: _____

Risk of Harm to Others Explain: _____

Display of Non-lethal Weapons (Circle: ASP Mace Taser)

Soft Controls (Escort Position, Touching, Grasping)

Balance Displacement (Less than take-down)

Compliance Techniques (Arm Locks, Pressure Points)

Type Animal: _____

Condition Animal: _____

How Destroyed: _____

SPCA Notified Assisted: Yes No

Level of Resistance

(If more than one observed, list order in boxes)

- Displayed Verbal & Physical Danger Cues
- Not Responding to Commands
- Refusing to Move, Resisting
- Aggressively Pulls Away
- Displays Manifestations of Imminent Assault
- Pushed or Shoved Officer
- Actively Resisting Arrest
- Striking/Kicking Officer
- Choking Officer
- Produces Weapon and Attempts Use or Uses
Type Weapon: _____
- Grabs or Attempted to Grab Officers Firearm
- Used or Attempted to Assault Officer w/ MV
- Other _____

Effect of Force/Resistance

(Suspect and Officer)

Suspect

- No visible injury, no complaint of pain
- No visible injury, complaint of minor pain
- Minor visible injury, no medical treatment
required
(Describe)
- Injury requiring outpatient medical treatment
(Describe)
- Injury requiring overnight hospitalization
(Describe)
- Deceased

Officer

- No visible injury, no complaint of pain
- No visible injury, complaint of minor pain
- Minor visible injury, no medical treatment
required
(Describe)
- Injury requiring outpatient medical treatment
(Describe)
- Injury requiring overnight hospitalization
(Describe)
- Deceased

Situational Factors Present

- Special Knowledge / Previous Contact Explain: _____
- Officer on the Ground Explain: _____
- Closeness of Weapon (Subject) Explain: _____
- Injury or Exhaustion (Officer) Explain: _____
- Distance from Subject Explain: _____
- Availability of Other Options Explain: _____
- Other _____ Explain: _____

Suspect Information

Suspect Name _____ DOB: _____ SSN: _____

Address: _____

Home Phone: _____ Work Phone: _____

Injured: Yes No Nature of Injury: _____

Treated by Medics: Yes No Medics: _____

Transported to Hospital: Yes No Hospital: _____

At the time of the incident, was the subject suspected of being under:

Mental/Stress Instability Influence of Drugs/Alcohol Other _____

Was Suspect under arrest at the time of the incident? Yes No

Subsequently Arrested? Yes No Charges: _____

Additional Suspect Information:

Officer's Statement of Facts

Check if Offense or Supplemental Report is attached

Officer Signature _____ Date Forwarded to Supervisor: _____

Supervisor's Review of Report

Date Received: _____ Date Reviewed: _____

Additional Paperwork Needed: Yes No If yes, list

Additional Clarification Needed: Yes No If yes, list

Date Request Made for Additional Paperwork or Clarification: _____ Date Returned: _____

Clarification Sufficient: Yes No If no, list comments recommendations

Complaint Received: Yes No If yes, attach with report. Dispatch Tapes On Hold: Yes No

Supervisor Review Recommendations:

- Officer's Actions Justified Department Policy (List Policy # _____)
- Officer's Actions Justified not Department Policy, but extenuating circumstances
- Officer's Actions Not Justified - Recommend Disciplinary Action be initiated
- Officer's Actions Not Justified - Recommend Additional Training for Officer
- Recommend Further Investigation Prior to Closure

Comments:

Supervisor Signature: _____ Date Forwarded to Chief: _____

Chief of Police Review of Report

Date Received: _____ Date Reviewed: _____

Additional Paperwork Needed: Yes No If yes, list

Additional Clarification Needed: Yes No If yes, list

Date Request Made for Additional Paperwork or Clarification: _____ Date Returned: _____

Clarification Sufficient: Yes No If no, list comments recommendations

Chief of Police Review and Decision on Report Closure:

- Concur with Supervisor's Recommendation as indicated below.
- Officer's Actions Justified Department Policy (List Policy # _____)
- Officer's Actions Justified not Department Policy, but extenuating circumstances
- Officer's Actions Not Justified - Recommend Disciplinary Action be initiated
- Officer's Actions Not Justified - Recommend Additional Training for Officer
- Recommend Further Investigation Prior to Closure

Comments:

Chief of Police Signature: _____ Date: _____
(Chief of Police will use for input into end of year reports) (Original Copy filed in Case File and Copy in Officer's Personnel File)