

ARREST REPORT

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|--------------------------------------|---|--------------------------------------|---|--|---|--|--|--|---|------------------------|-----------|
| A G E N C Y | Agency Name Chapel Hill Police Department | | ORI 0680100 C0004 | | Date/Time Arrested 07/30/2014 00:23 | | OCA 1409353 | | | | |
| | Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos | Fingerprint Card Check Digit # (CKN) | | Arrest Tract | | Residence Tract 3A | | Arrest Number 32293 | | | |
| A R R E S T E E | Name (Last, First, Middle) LOMBOY, JASON ROBERT | | | D.O.B. | | Age 26 | Race W | Sex M | Place of Birth ALLENTOWN, PA | Country of Citizenship | |
| | Current Address 405 Presque Isle Ln, CHAPEL HILL, NC 27514 | | | Phone | | Occupation Urologist | | | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident | | |
| | Employer's Name UNC HOSPITAL | | | Address | | | Phone | | | | |
| | Also Known As (Alias Names) | | | Hgt 5'10 | Wgt 180 | Hair BRO | Eyes BRO | Skin Tone | Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk | | |
| | Scars, Marks, Tattoos | | | Social Security # | | OLN and State | | | Misc. # and Type | | |
| | Nearest Relative Name | | | Address | | | Phone | | | | |
| A R R E S T | If Armed, Type of Weapon NOT APPLICABLE/NONE | | <input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant | | | Place of Arrest 1 EUROPA DR, CHAPEL HILL | | | | | |
| | Charge #1 Impaired Driving Dwi | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | Counts 1 | DCI Code 2100 | Offense Jurisdiction (if not arresting agency) | | Statute # 20-138.1 | Warr. Date | | |
| | Charge #2 Fail To Maintain Lane Control | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | Counts 1 | DCI Code 4010 | Offense Jurisdiction (if not arresting agency) | | Statute # 20-146(D)(1)) | Warr. Date | | |
| | Charge #3 | | <input type="checkbox"/> Fel <input type="checkbox"/> Misd | Counts | DCI Code | Offense Jurisdiction (if not arresting agency) | | Statute # | Warr. Date | | |
| V E H I C L E | VYR 2003 | Make ACUR | Model MDX | Style MP | Color BEI | Plate #/State CKZ1036 NC 2015 | VIN 2HNYD18673H516050 | | | | |
| | Vehicle 1. <input checked="" type="checkbox"/> Left at Scene <input checked="" type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time 07/30/2014 00:00 2. <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3. <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? _____ | | | | | | | | | | |
| C O N F I N E D | Date/Time Confined | | Place Confined | | | Committing Magistrate TONY OAKLEY | | | | | |
| | Type Bond <input checked="" type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other | | Bond Amount \$0.00 | | Trial Date 08/07/2014 09:00 | | Court Of First Appearance | | City HILLSBOROUGH | | |
| | Assisting Officer Name/ID # 0 | | | Released By (Name/Department/ID #) | | | | Date/Time Released | | | |
| Status Codes | L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found | | | | | | | | | | |
| D R U G S | DCI | Status | Quantity | Type Measure | Suspected Type | | | Check up to 3 types of activity for each | | | |
| | | | | | | Possess | Buy | Sale | Mfg. | Importing | Operating |
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| C O M P | Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/> | | | Address | | | | Phone: | | | |
| | The above subject was arrested for the above charges, and processed at the Chapel Hill Police Department. The subject was released with a written promise to appear. | | | | | | | | | | |
| S T A T U S | Arresting Officer Signature/ID # CLIFFORD, J. G. (8795) | | | Date/Time Submitted 07/30/2014 00:23 | | | Supervisor Signature RHOADS, D. J. | | | | |
| | Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed | | Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest / No Supplement Needed <input type="checkbox"/> Arrest / No Investigation | | | Arrestee Signature | | | | | |