

ARREST REPORT

A G E N C Y	Agency Name Chapel Hill Police Department				ORI 0680100 C0004		Date/Time Arrested 09/08/2014 22:22		OCA 1411239				
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract		Residence Tract		Arrest Number 32576				
A R R E S T E E	Name (Last, First, Middle) COLEY, DARREN ALAN				D.O.B.		Age 47	Race B	Sex M	Place of Birth			
	Current Address Streets, CHAPEL HILL, NC 27514				Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown		
	Employer's Name				Address				Phone				
	Also Known As (Alias Names)				Hgt 5'06	Wgt 150	Hair BLK	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 type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 175 E FRANKLIN ST, CHAPEL HILL						
	Charge #1 Open Container		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2680	Offense Jurisdiction (if not arresting agency)		Statute # CO 3-3	Warr. Date				
	Charge #2		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #	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	Make	Model	Style	Color	Plate #/State		VIN					
	Vehicle 1. <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ 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						
	Type Bond <input 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 10/21/2014 09:00		Court Of District Criminal Court		City CHAPEL HILL				
	Assisting Officer Name/ID # 0				Released By (Name/Department/ID #) BELLAVANCE, J. M.				Date/Time Released 09/09/2014 01:47:30				
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
C O M P	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:				
	Mr. Coley was cited for the above charge after he was found with an open bottle of Irish Rose Whiskey.												
S T A T U S	Arresting Officer Signature/ID # BELLAVANCE, J. M. (6764)				Date/Time Submitted 09/09/2014 01:46			Supervisor Signature OPPEGARD, P. D.					
	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							