

INCIDENT REPORT

CASE NUMBER
09-115038

INCIDENT TYPE

SEXUAL BATTERY

COUNTS 1
INCIDENT CODE 16-6-22.1

PREMISE TYPE

<input type="checkbox"/> HIGHWAY	<input type="checkbox"/> INC. STATION
<input type="checkbox"/> RESIDENCE STORE	<input type="checkbox"/> BANK
<input checked="" type="checkbox"/> COMMERCIAL	<input type="checkbox"/> RESIDENCE
<input type="checkbox"/> SCHOOL/CAMPUS	<input type="checkbox"/> ALL OTHER

INCIDENT LOCATION

027 BROAD STREET AUGUSTA, GA 30901 (THE LOFT)

LOG CODE

INCIDENT DATE

TIME 0019

DATE

TIME

STRANGER TO STRANGER
YES NO UNK

WEAPON TYPE

<input type="checkbox"/> GUN	<input type="checkbox"/> KNIFE CUTTING TOOL
<input checked="" type="checkbox"/> HANDS / FIST ETC.	<input type="checkbox"/> OTHER

COMPLAINANT

DOB 010788

DOB

ADDRESS

AUGUSTA, GA 30909

PHONE NUMBER

VICTIM NAME

DOB SAME

DOB SAME

ADDRESS

AUGUSTA, GA 30909

PHONE NUMBER

SAME AS COMPLAINANT

RACE W SEX F AGE 21

RESIDENCE PHONE

BUSINESS PHONE

ADDRESS

SAME AS COMPLAINANT

CENSUS TRACT

EMPLOYER OR OCCUPATION

SELF EMPLOYED

STUDENT

YES NO

IF YES, NAME VICTIM'S SCHOOL

VEHICLE

<input type="checkbox"/> STOLEN	TAG NUMBER	STATE	YEAR	V.IN.	PLATE ONLY	VIN PLATE ONLY
<input type="checkbox"/> RECOVD	YEAR	MAKE	MODEL	STYLE	COLOR	
<input type="checkbox"/> SUSPECT	MOTOR SIZE (CC)	AUTO	MAN	SPD.	INSURED BY	
	TRANS.					

PROPERTY

STOLEN	VEHICLES	CURRENCY, NOTES, ETC.	JEWELRY, PREC. METALS	FURS	
RECOVERED					
STOLEN	CLOTHING	OFFICE EQUIP.	TV, RADIO, ETC.	HOUSEHOLD GOODS	
RECOVERED					
STOLEN	FIREARMS	CONSUMABLE GOODS	LIVESTOCK	OTHER	TOTAL
RECOVERED					

PROPERTY RECOVERY SPD ONLY
APPROPRIATION CODES

THEFT / RECOVERY

DATE OF THEFT

- CITY
- COUNTY
- STATE
- OUT OF STATE
- UNKNOWN

GCIC ENTRY WARRANT MISSING PERSONS VEHICLE ARTICLE BOAT GUN SECURITIES

DRUG

DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG-RELATED? YES NO

IF YES, PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER.

<input type="checkbox"/> 1 - AMPHETAMINE	<input type="checkbox"/> 2 - BARBITUATE	<input type="checkbox"/> 3 - COCAINE	<input type="checkbox"/> 4 - HALLUCINOGEN	<input type="checkbox"/> 5 - HEROIN
<input type="checkbox"/> 6 - MARIJUANA	<input type="checkbox"/> 7 - METHAMPHETAMINE	<input type="checkbox"/> 8 - OPIUM	<input type="checkbox"/> 9 - SYNTHETIC NARCOTIC	<input type="checkbox"/> U - UNKNOWN

CLEAR

REQUIRED DATA FIELDS FOR CLEARANCE REPORT CLEARED BY ARREST EXCEPTIONALLY CLEARED UNFOUNDED

DATE OF CLEARANCE 061609 ADULT JUVENILE

REPORT DATE 061609

NARRATIVE

WITNESS 1: CLINE, DOUGLAS JAMES, W/M, 123185 / [REDACTED] AUGUSTA, GA 30909, [REDACTED]

WITNESS 2: CARMINE, ALLEN, B/M, [REDACTED] AUGUSTA, GA 30909, [REDACTED] 101060 / [REDACTED]

SUBJECT: NEVATT, LUCIAN JAMES, W/M, 031285 / [REDACTED] NIXA, MO 65714, STONE COUNTY SHERIFF'S OFFICE, [REDACTED]

ON 061609 AT APPROXIMATELY 0019 HOURS, DEP. WARD RESPONDED TO THE ABOVE LOCATION IN REFERENCE TO AN ASSAULT. UPON ARRIVAL ON SCENE THE LISTED COMPLAINANT / VICTIM, [REDACTED] ADVISED SHE WENT INTO THE RESTROOM AT THE ABOVE LOCATION AND UPON DOING SO THE LISTED UNKNOWN SUBJECT CAME IN BEHIND HER AT WHICH TIME HE LOCKED THE DOOR BEHIND HIM AND BEGAN FORCING HIMSELF ON HER IN A SEXUAL MANOR. MS. [REDACTED] ADVISED THE SUBJECT FONDLED HER BREASTS AS WELL AS HER GENITAL REGION WITH HIS HANDS WHILE FORCING HER UP AGAINST THE WALL. SHE FURTHER ADVISED HE ATTEMPTED TO REMOVE HER BRA AND PLACED HIS HAND INSIDE OF HER PANTIES SHE ADVISED HE MADE SEVERAL COMMENTS TOWARDS HER WHILE FORCEFULLY KISSING HER STATING HE WANTED TO MAKE OUT WITH HER. SHE ADVISED HIM SHE DID NOT KNOW HIM (OVER)

REPORTING OFFICER DEREK WARD B738 NUMBER 401

APPROVING OFFICER [Signature] NUMBER 1062

1517

ADDITIONAL INFORMATION

TO WHICH HIS REPLY WAS "WE DON'T NEED TO KNOW EACH OTHER, WERE AT A BAR". SHE STATED SHE TRIED TELLING HIM HER HUSBAND WAS WAITING FOR HER OUTSIDE TO WHICH HIS REPLY WAS "YOUR HUSBAND DOESN'T HAVE TO KNOW." SHE IN TURN TOLD HIM THAT IF HE WANTED TO HAVE SEX WITH HER IT WASN'T GOING TO BE IN A BATHROOM, TO TAKE HER HOME. SHE ALSO ADVISED SHE TOLD THE SUBJECT THAT SHE LIKED TO BE HANDCUFFED AT WHICH TIME HE ADVISED HER HE WAS A COP AND PULLED OUT A WALLET WHICH CONTAINED A PICTURE OF A BADGE WITH HAND WRITTEN WRITING ON IT. SHE ADVISED THE SUBJECT IT WAS ILLEGAL TO HAVE SEX IN A BATHROOM AT WHICH TIME HE ADVISED IT WAS OKAY BECAUSE HE WAS A COP. MS. [REDACTED] STATED SHE MANAGED TO TALK HIM DOWN BY TELLING HIM SHE WOULD HAVE SEX WITH HIM IF HE ALLOWED HER TO TELL HER FRIENDS SHE WAS GOING TO BE A WHILE AT WHICH TIME SHE WAS ABLE TO GET OUT OF THE BATHROOM. SHE ADVISED SHE TOLD THE DJ OF THE BAR AND THE BOUNCER, WITNESS, MR. CARMINE OF THE BAR REMOVED THE SUBJECT FROM THE BATHROOM AND THREW HIM OUT OF THE BAR.

DEPUTIES GAINED INFORMATION THAT THE UNKNOWN WM SUBJECT WAS LOCATED AT THE MARRIOTT HOTEL AT #2 10TH STREET AUGUSTA, GA 30901. DEPUTIES RESPONDED TO THAT LOCATION WHERE MR. NEVATT WAS LOCATED AND POSITIVELY IDENTIFIED BY MS. [REDACTED]. MR. NEVATT WAS PLACED UNDER ARREST AND TRANSPORTED TO THE RICHMOND COUNTY JAIL. MS. [REDACTED] WAS TRANSPORTED TO THE WARRANT OFFICE WHERE A WARRANT WAS SECURED FOR MR. NEVATT FOR SEXUAL BATTERY.

***CODES: W-Witness, S-Suspect, A-Arrested**

SUBJECT #1	*CODE	NAME - LAST, FIRST, MIDDLE	SS#	DOB	HEIGHT	WEIGHT
	A	NAVATT, LUCIAN JAMES	[REDACTED]	031285	511	210
		STREET ADDRESS, CITY, STATE, ZIP	HOME PHONE		WORK PHONE	
		[REDACTED], NIXA, MO 65714	[REDACTED]		UNKNOWN	
		ALIAS, STREET NAME, NICKNAME	PLACE OF EMPLOYMENT/OCCUPATION			
		NONE	STONE COUNTY SHERIFF'S OFFICE			
SUBJECT #2	*CODE	NAME - LAST, FIRST, MIDDLE	SS#	DOB	HEIGHT	WEIGHT
	W	CLINE, DOUGLAS JAMES	[REDACTED]	123185	509	150
		STREET ADDRESS, CITY, STATE, ZIP	HOME PHONE		WORK PHONE	
		[REDACTED]	[REDACTED]		NONE	
		ALIAS, STREET NAME, NICKNAME	PLACE OF EMPLOYMENT/OCCUPATION			
		NONE	NONE			
SUBJECT #3	*CODE	NAME - LAST, FIRST, MIDDLE	SS#	DOB	HEIGHT	WEIGHT
	W	CARMINE, ALLEN	[REDACTED]	101060	511	185
		STREET ADDRESS, CITY, STATE, ZIP	HOME PHONE		WORK PHONE	
		[REDACTED] AUGUSTA, GA 30909	[REDACTED]		UNKNOWN	
		ALIAS, STREET NAME, NICKNAME	PLACE OF EMPLOYMENT/OCCUPATION			
		NONE	THE LOFT			
SUBJECT #4	*CODE	NAME - LAST, FIRST, MIDDLE	SS#	DOB	HEIGHT	WEIGHT
		STREET ADDRESS, CITY, STATE, ZIP	HOME PHONE		WORK PHONE	
		ALIAS, STREET NAME, NICKNAME	PLACE OF EMPLOYMENT/OCCUPATION			