

DORAVILLE POLICE DEPARTMENT INCIDENT REPORT

AGENCY ID
GA0440600

**PUBLIC COPY
ORIGINAL REPORT**

CASE NUMBER
2012-030396

Statute	INCIDENT TYPE	CNT	GOC	UCR CODE	UCR DESCRIPTION
	INFORMAION REPORT/HARRASSAMENT	1	N	7399	OTHER:OTHER THAN WHATS AVAILABLE

EVENT	LOCATION DESCRIPTION AND ADDRESS		ZONE		PREMISE TYPE									
	2674 WOODWIN RD DORAVILLE, GA 30360 -				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> HIGHWAY</td> <td><input type="checkbox"/> SVC STATION</td> </tr> <tr> <td><input type="checkbox"/> CONVENIENCE STORE</td> <td><input type="checkbox"/> BANK</td> </tr> <tr> <td><input checked="" type="checkbox"/> COMMERCIAL</td> <td><input type="checkbox"/> RESIDENCE</td> </tr> <tr> <td><input type="checkbox"/> SCHOOL/CAMPUS</td> <td><input type="checkbox"/> ALL OTHERS</td> </tr> </table>		<input type="checkbox"/> HIGHWAY	<input type="checkbox"/> SVC STATION	<input type="checkbox"/> CONVENIENCE STORE	<input type="checkbox"/> BANK	<input checked="" type="checkbox"/> COMMERCIAL	<input type="checkbox"/> RESIDENCE	<input type="checkbox"/> SCHOOL/CAMPUS	<input type="checkbox"/> ALL OTHERS
	<input type="checkbox"/> HIGHWAY	<input type="checkbox"/> SVC STATION												
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<input checked="" type="checkbox"/> COMMERCIAL	<input type="checkbox"/> RESIDENCE													
<input type="checkbox"/> SCHOOL/CAMPUS	<input type="checkbox"/> ALL OTHERS													
INCIDENT DATE: 03/21/2012 TIME: 1913 TO DATE: 03/21/2012 TIME: 1918 STRANGER TO STRANGER YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> UNK <input type="checkbox"/>		DISCOVERED BY <input type="checkbox"/> Officer On Patrol <input type="checkbox"/> Reporting Party <input type="checkbox"/> Private Security <input type="checkbox"/> Alarm <input checked="" type="checkbox"/> Complainant		WEAPON TYPE <input type="checkbox"/> GUN <input type="checkbox"/> KNIFE <input type="checkbox"/> HANDS/FISTS, ETC. <input type="checkbox"/> OTHER <input type="checkbox"/> UNKNOWN										
DAY OF THE WEEK (INCIDENT) SUN <input type="checkbox"/> MON <input type="checkbox"/> TUE <input checked="" type="checkbox"/> WED <input type="checkbox"/> THU <input type="checkbox"/> FRI <input type="checkbox"/> SAT <input type="checkbox"/> UNK <input type="checkbox"/>		WEATHER CONDITIONS												

PROPERTY TOTALS	01 - VEHICLES		02 - CURRENCY, NOTES, ETC.		03 - JEWELRY, PREC. METALS		04 - FURS		THEFT / RECV.		GOVT PROP.
	STOLEN								<input type="checkbox"/>	<input type="checkbox"/>	
	RECOVERED								1=CITY 2=COUNTY 3=STATE 4=OUT OF STATE 5=UNKNOWN		
05 - CLOTHING		06 - OFFICE EQUIP.		07 - TV, RADIO, ETC.		08 - HOUSEHOLD GOODS		TOTALS		THEFT DATE	
STOLEN											
RECOVERED											
09 - FIREARMS		10 - CONSUMABLE GOODS		11 - LIVESTOCK		12 - OTHER		RECOVERY DATE			
STOLEN											
RECOVERED											

DRUG	DID INVESTIGATION INDICATE THAT THIS INCIDENT WAS DRUG-RELATED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, PLEASE INDICATE THE TYPE OF DRUG(S) USED BY OFFENDER										DID INVESTIGATION INDICATE THAT INCIDENT WAS GANG RELATED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	DRUG 1	DRUG 2	DRUG 3	DRUG 4	DRUG 5						NAME OF GANG:	
	DRUG 6	DRUG 7	DRUG 8	DRUG 9	DRUG 10							

STATE	OCA <input type="checkbox"/> ENTRY <input type="checkbox"/> CANCEL <input type="checkbox"/> CLEARANCE <input type="checkbox"/>				CASE STATUS					
	PERSON <input type="checkbox"/>	WARRANT <input type="checkbox"/>	VEHICLE <input type="checkbox"/>	ARTICLE <input type="checkbox"/>	BOAT <input type="checkbox"/>	GUN <input type="checkbox"/>	ACTIVE <input type="checkbox"/>	CLEARED BY ARREST <input type="checkbox"/>	EX CLEARED <input type="checkbox"/>	UNFOUNDED <input type="checkbox"/>

ADMINISTRATION	ARREST AT OR NEAR OFFENSE SCENE		TOTAL NUMBER ARRESTED		DATE OF REPORT		ADULT		JUVENILE	
	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	0		03/21/2012		<input type="checkbox"/>		<input type="checkbox"/>	
	EVIDENCE COLLECTED?	N	PHOTOS TAKEN?		FOLLOW UP - PATROL?	N	CLEARANCE DATE			
	PRINTS TAKEN?	N	COMPLAINT UNFOUNDED?	N	FOLLOW UP - DETECTIVES	Y	CASE STATUS		INACTIVE	
	BIO./DNA EVIDENCE?	N	WILLING TO PROSECUTE?	N	RESPONSE CODE		REVIEWED BY			
	REPORTING OFFICER	1129	J. NALEPA		REVIEWED DATE		DIVISION ASSIGNED		INVESTIGATIONS	
APPROVING OFFICER	1108	J. HUDGINS		ASSIGNED DATE		03/22/2012		INVESTIGATOR ASSIGNED		
APPROVED DATE	03/21/2012			ASSIGNED DATE		03/22/2012		1131		
								K. KASPAR		

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PERSONS

<input checked="" type="checkbox"/> COMPLAINANT		<input type="checkbox"/> VICTIM	<input type="checkbox"/> WITNESS	<input type="checkbox"/> OFFENDER	<input type="checkbox"/> PRIMARY AGGRESSOR	<input type="checkbox"/> JUVENILE	<input type="checkbox"/> RAPE VICTIM
NAME FARIDI, ZUBIAR						TYPE	
ADDRESS 4087 TILLY MILL RD						EMP.	
CITY DORAVILLE			ST GA	ZIP 30360		SCHOOL	
EMAIL						YEAR OF BIRTH 1962	
SSN		RACE O	HEIGHT	HAIR BLK	PHONE 404-307-5302		
DOB		SEX M	WEIGHT	EYES BRO	CELL		
MISSING <input type="checkbox"/>		DEAD/UNIDENTIFIED <input type="checkbox"/>	UNKNOWN <input type="checkbox"/>	RETURNED <input type="checkbox"/>	WANTED <input type="checkbox"/>	SUSPECT <input type="checkbox"/>	WARRANT <input type="checkbox"/> ARRESTED <input type="checkbox"/>

OFF. DATE/TIME	ARR. AGENCY	ORI
ARREST DATE	ARREST TIME	ARREST / AT NEAR
OFFENDER TRACK NO.		GCIC CLASS. NO.

CHARGES			
STATUTE	INCIDENT TYPE	CNT	UCR CODE UCR DESCRIPTION

PERSONS

<input checked="" type="checkbox"/> COMPLAINANT		<input type="checkbox"/> VICTIM	<input type="checkbox"/> WITNESS	<input type="checkbox"/> OFFENDER	<input type="checkbox"/> PRIMARY AGGRESSOR	<input type="checkbox"/> JUVENILE	<input type="checkbox"/> RAPE VICTIM
NAME RASHIED, ADRIAN						TYPE	
ADDRESS 2663 BEACON DR						EMP.	
CITY DORAVILLE			ST GA	ZIP 30360		SCHOOL	
EMAIL						YEAR OF BIRTH 1994	
SSN		RACE O	HEIGHT	HAIR	PHONE		
DOB		SEX M	WEIGHT	EYES	CELL		
MISSING <input type="checkbox"/>		DEAD/UNIDENTIFIED <input type="checkbox"/>	UNKNOWN <input type="checkbox"/>	RETURNED <input type="checkbox"/>	WANTED <input type="checkbox"/>	SUSPECT <input type="checkbox"/>	WARRANT <input type="checkbox"/> ARRESTED <input type="checkbox"/>

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NARRATIVE		Seq. No.	1
Narrative Type	Reporting Officer	Statement Date	Time
NARRATIVE	1129 J. NALEPA	03/21/2012	
<p>On March 21, 2012 at approximately 1913 hours I was dispatched to 2674 Woodwin Rd. Doraville, Ga. 30360 (Mosque). The call was in reference to an ongoing harassment problem.</p> <p>Upon arrival, I met with a Zubiar Faridi and Adnan Rashied. Rashied stated last week a ball was kicked into the backyard of 2677 Beacon Dr. the residence of Thomas Owens. Rashied said he went and knocked on the door of the residence in an attempt to retrieve the ball. Rashied stated that Owens started yelling at him and stated "Even the Imam threatened to kill me". Then Faridi stated that the harassment towards members of the Mosque from Owens has been a ongoing problem since last August. Faridi went on to say that Owens manifestations seemed to be more aggressive and he seems more agitated. Faridi fears that Owens is going to act in a violent manner towards property of the Mosque or a member.</p> <p>I attempted to make contact with Owens at his residence, but he was not home.</p>			