 COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED		Crime/Condition UNCLASSIFIED COMPLAINT	Cmd Code 120	Date of This Report 05/08/2010	
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD	Follow-Up No. 32

Complainant's Name RADDI, ANTHONY	Nickname/Alias/Middle Name	Address 1 LEFRAK CITY PLAZA QUEENS NY	Apt No.
Sex MALE	Race WHITE	Date of Birth	Age
Home Telephone	Business Telephone 718-876-4725	Cell Phone	Beeper #
		E-Mail Address	



Person Interviewed Last Name, First M.I. MARTINSEN, MICHAEL	Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship	Sex MALE	Race WHITE	Date of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #
		E-Mail Address	

Activity Address Location NYC	Street 1 RICHMOND TERRACE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street WALL STREET and SOUTH STREET		Intersection of corner:		Premise Type	

Topic/Subject:
(INTERVIEW) INTERVIEW P.O. MARTINSEN (AIDED)

Summary of Investigation:
1. On May 8, 2010, at approximately 1220 hrs I did conduct an on scene interview of P.O. Martinsen of the S.I. Ferry Unit in regards to the above listed investigation. P.O. Martinsen Shield # [REDACTED] stated he was assigned to the ferry vessel Andrew Barbieri. P.O. Martinsen further stated that while heading to Staten Island from the Manhattan side he noticed the boat going an unusual high rate of speed while preparing to dock. P.O. Martinsen further stated as the boat came closer to the dock he realized they were going to crash and he braced for impact. P.O. Martinsen further stated that during the impact he fell forward landing on his knee and twisting his back awkwardly. P.O. Martinsen was removed to RUMC where he was treated and released. ~ 2. Case Active.

Reporting Officer:	Rank POM	Name DANIEL GUARIANO	Tax Rec. No.	Command 431
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

 		COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED		Crime/Condition UNCLASSIFIED COMPLAINT	Cmd Code 120	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD	Follow-Up No. 37	

Complainant's Name RADDI, ANTHONY	Nickname/Alias/Middle Name	Address 1 LEFRAK CITY PLAZA QUEENS NY	Apt No.
Sex MALE	Race WHITE	Date of Birth	Age
Home Telephone	Business Telephone 718-876-4725	Cell Phone	Beeper #
E-Mail Address			



Person Interviewed Last Name, First M.I. MELENDEZ, STEVEN JR	Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship UNKNOWN/NONE	Sex MALE	Race WHITE HISPANIC	Date of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #
E-Mail Address			

Activity Address Location NYC	Street 355 BARD AVENUE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street	Intersection of corner:			Premise Type	

Topic/Subject:
(INTERVIEW) INTERVIEW OF INJURED PASSENGER MELENDEZ, STEVEN JR

Summary of Investigation:
1. On May 8, 2010, at approximately 1340hrs while present at RUMC I did interview the following injured passenger in regards to this investigation. ~ ~2. Mr. Melendez at the time of this interview was fitted with a neck brace awaiting to be X-Rayed. Mr. Melendez states that he was on the second level seated in the middle of the deck. As the vessel was approaching the Staten Island terminal he felt as if it was moving fast. He did not hear any warning signals prior to impact. When the vessel did strike th e dock Mr. Melendez was jolted forward and then back into his seat. He felt pain in his neck and back. Mr. Melendez does inform me that he had sustained a bulging disc and his neck and back from a previous accident in January of this year. ~ ~3. Case prepared for P.O Guariano.

Reporting Officer:	Rank DT3	Name ARISTOTL PSATHAS	Tax Reg. No. 907099	Command 431
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

  COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED				Crime/Condition UNCLASSIFIED COMPLAINT	Cmd Code 120	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD	Follow-Up No. 11	



Complainant's Name	Nickname/Alias/Middle Name	Address		Apt No.
Sex	Race	Date of Birth	Age	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Person Interviewed Last Name, First M.I. MENTORE SONIA P		Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship	Sex FEMALE	Race BLACK	Date of Birth	Age
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Activity Address Location NYC	Street 1 RICHMOND TERRACE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street WALL STREET and SOUTH STREET		Intersection of corner:		Premise Type	

Topic/Subject: (INTERVIEW) INTERVIEW SONIA MENTORE (AIDED)
Summary of Investigation: 1. On May 8, 2010, at approximately 0950 hrs the undersigned present at 1 Richmond Terrace did conduct an interview with Sonia Mentore, who was a passenger on the Andrew Barberi SI Ferry Boat. Ms. Mentore stated that she heard the announcer scream over the PA system "step back step back", she then states that she tried to run back towards the back of the boat and she fell on her left side onto the chair. Ms. Mentore stated that she is suffering from back pain as well as pain to her left leg. ~ ~2. Submitte d for PO Guariano.

Reporting Officer:	Rank DT3	Name GENEE PARKER	Tax Reg. No.	Command 431
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

  COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED				Crime/Condition UNCLASSIFIED COMPLAINT	Cmd Code 120	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD	Follow-Up No. 38	

Complainant's Name RADDI, ANTHONY	Nickname/Alias/Middle Name	Address 1 LEFRACK CITY PLAZA QUEENS NY	Apt No.
Sex MALE	Race WHITE	Date of Birth	Age
Home Telephone	Business Telephone	Cell Phone	Beeper #
E-Mail Address			



Person Interviewed Last Name, First M.I. NALLASEGA, NAGA	Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship	Sex MALE	Race UNKNOWN	Date of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #
E-Mail Address			

Activity Address Location NYC	Street 355 BARD AVENUE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street CASTLETON AVENUE and MOODY PLACE		Intersection of corner:		Premise Type	

Topic/Subject:
(INTERVIEW) INTERVIEW NAGA NALLASEGA (AIDED)

Summary of Investigation:
1. On May 8, 2010, at approximately 1345 hrs I did interview Naga Nallasega inside of 355 Bard Avenue (Emergency Room) in regards to the above listed investigation. Mr Nallasega stated that he was standing in the middle deck of the ferry when he felt an impact and slammed into the chair behind him causing him back pain. ~ ~2. Case Active.

Reporting Officer:	Rank POM	Name DANIEL GUARIANO	Tax Reg. No.	Command 431
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

  COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED				Crime/Condition INVESTIGATE AIDED	Cmd Code 431	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD	Follow-Up No. 22	

Complainant's Name	Nickname/Alias/Middle Name	Address		Apt No.
Sex	Race	Date of Birth	Age	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Person Interviewed Last Name, First M.I. PIETTE, NADGIE K	Nickname/Alias/Middle Name	Address		Apt No.
Position/Relationship UNKNOWN/NONE	Sex FEMALE	Race BLACK	Date of Birth	Age
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Activity Address Location NYC	Street 1 RICHMOND TERRACE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street WALL STREET and SOUTH STREET		Intersection of corner:		Premise Type	

Topic/Subject:
(INTERVIEW) AIDED NADGIE PIETTE

Summary of Investigation:
1. On May 8, 2010, at approximately 1030 hrs the u/s, while present at the Staten Island Ferry Terminal located at 1 Richmond Terrace (lower level), did have the opportunity to speak with Nadgie Piette. Ms Piette informed me that she was on the Staten Island Ferry Boat Barbieri, upper level, during the accident and states that the boat appeared to be going at a fast rate of speed towards the docking ramps, of the Staten Island Ferry Terminal. She then heard a horn blow a couple of times, then heard a cras h, to which she fell to the ground. Ms Piette further states that she feels pain in her back and right arm. ~ ~Case active

Reporting Officer:	Rank DT3	Name TIMOTHY DONNELLY	Tax Rec. No.	Command 433
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		