## GAINESVILLE POLICE DEPARTMENT INCIDENT REPORT

GA0690100  REPORT TAKEN: OVER THE PHONE	√ IN PERSON □	OTHER	JUVENILE: Y	YES □ NO ☑
Incident #: 2014-003827-Date Occ	urred: 1 <u>0 14 14 </u> To	o: 10/10/14 ate Reported:	Time: 1120	To: 1130 Time: 1130
Incident Type: Death Investigation Incident Type: Incident Type: Location of Incident: Palmax Dr (Business Name (If applicable):		Code Code	e Section: e Section: Di	strict: 4
Victim: Last: Vashanaian		rence nesville		
Street# Street Name Phone: Home: Unknow.	) Wor	City k:	State	Zip
Sex: M Race: V DOB: Hair: UNK Eyes: UNK OLN: Will the victim prosecute? Yes No	UNKNOWO	Hgt: State:	UNK WE	st: UNK
Complainant: (If other than victim or arres	ting officer)	oùr	Middle:	Edward
Street# Street Name Phone: Home: Cell:	Word Geo		State N A	Zip
Cell:				
Sex: Race: DOB:		SSN:		
	Charge(s):		Middle:	
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell:	Charge(s): First:	City er Phone:	State	Zip
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name	Charge(s): First:	SSN:		•
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB:	Charge(s): First:	City er Phone: Hgt: State:	State Wg	•
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB: Hair: Eyes: OLN:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell:	Charge(s): Othe Othe	City er Phone: Hgt: State:	State  Wg SSN:  Middle:  State	Zip
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB: Hair: Eyes: OLN:  Arrested: Citation#: Last:  Street# Street Name	Charge(s): Othe Othe	City er Phone: Hgt: State:	State  Wg SSN:  Middle:  State	t:
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB: Hair: Eyes: OLN:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB:	Charge(s): First:  Othe  Charge(s): First:  Othe  Rockwell Lic Yr:	City Phone: Hgt: State:  City Phone: Hgt: State:  Model: Come VIN:	State  Wg SSN:  Middle:  State  Wg SSN:  WG ONLOW	Zip t:  Olor: Onk
Sex: Race: DOB:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB: Hair: Eyes: OLN:  Arrested: Citation#: Last:  Street# Street Name Phone: Home/Cell: Sex: Race: DOB: Hair: Eyes: OLN:  Incident Vehicle: Year: 1970 Make: Lic #: N 148 J Lic St.: GA	Charge(s): First:  Othe  Charge(s): First:  Othe  Charge(s): First:  Othe	City Phone: Hgt: State:  City Phone: Hgt: State:  VIN:	State  Wg SSN:  Middle:  State  Wg SSN:  WG ONLOW	Zip t:  Olor: Onk

## PROPERTY RECORD

GA0690100		Incident #:	905000-11DP
Stolen Recovered Damage Lost Type of Property:	Brand:	Model #:	
Serial #:			
Remarks:	Date Occurred:	Value:	\$
Stolen Recovered Damage Lost			
Type of Property:		Model #:	
Serial #:			
Remarks:			
Date Reported:	Date Occurred:	Value:	\$
Stolen Recovered Damage Lost			
Type of Property:		Model #:	
Serial #:	Owner Applied #:	<del></del>	
Remarks:			
Date Reported:	Date Occurred:	Value:	\$
☐ Stolen ☐ Recovered ☐ Damage ☐ Lost			
Type of Property:		Model #	
Serial #:			
Remarks:			
Date Reported:	Date Occurred:	Value:	\$
Stolen Recovered Damage Lost			
Type of Property:		Model #:	
Serial #:		Wiodei #.	
Remarks:	Date Occurred:	Value:	\$
Stolen Recovered Damage Lost Type of Property:		3.6 - 1 - 1 //	
	Brand:	Model #:	
Serial #:Remarks:			
	Date Occurred:	Value:	\$
Stolen Recovered Damage Lost			T
	Brand	Model #	
Type of Property:Serial #:	Owner Applied #:	Model #:	
n ,			
	Date Occurred:	Value:	\$
		7 4140.	*
Stolen Recovered Damage Lost	D. J.		
Type of Property:	Orange A malinal #	Model #:	
Serial #: Remarks:			
		Value	¢
	Date Occurred:		
Attach additional property records if necessary	TOTAL: Property Taken \$	Dam	nage \$
Reporting Officer: Escalante #57			

PERSON II	NFORMATION	11.5
GA0690100		Incident #: 2014-0638 8
☐ Suspect		
Last: Statesfield First:	Sherry	Middle: Renee
Street# Street Name	<u>Carnesur</u>	State Zip
Phone: Home:	Work:	
Cell:	Email:	
Sex: F Race: UNK DOB: UNK		Hgt: UNK Wgt: UNK SSN: UNKNOWN
Hair: <u>UNK</u> Eyes: <u>UNK</u> OLN: <u>UNK</u>		3514.
Describe identifying features:		
Vehicle Description:		
Suspect Witness Suspect Vehicle		
Last: unitehend First:	Richard	Middle:
Ga	inesville, GA	
Phone: Home:	Cit <u>y</u> Work:	State Zip
Cell:	Email:	
Sex: Race: DOB:	Appx. Age: 49	Hgt: 510 Wgt: 175
	Owo State: 6A	ssn: <u>Declined</u>
Describe identifying features:		
Vehicle Description:		
☐ Suspect		
Last: Suspect venicle  First:	Michael	Middle:
DU	10th, GA	
Street# Street Name	City	State Zip
Phone: Home: Cell:	Work: Email:	X+
Sex: Nace: Nace: DOB:	Appx. Age:	Hgt: 59 Wgt: 185
Hair: BRO Eyes: BRO OLN: UNK	NOWN State: OA	SSN:
Describe identifying features:		
Vehicle Description:		
Suspect Witness Suspect Vehicle		
Last: Chandler First:	- Kelly	Middle:
	Gainesville	e, GA
Street# Street Name  Phone: Home:	City	State Zip
Phone: Home: Univ		UNK UNK
Sex: Nace: NDOB:	Appx. Age:	Hgt: UNIC Wgt: UNK
	LNOWN State: GA	SSN: UNKNOWN
Describe identifying features: (INVOIVED IN	plane crash)	)
Vehicle Description:		
Attach additional person information record if necessary.		
1 222 222 222 222 222 222 222 222 222 2		
Reporting Officer: Escalante #57		

NARRATIVE Incident #: <u>2014</u>-063827

GA0690100	Incident #: <u>2014-063827</u>
MVR: NO Audio: NO	Page: _1 _ of _1
on iolivolabit, 1 (ofc. Escalante #57) wo	as dispatched to
the area Palmour Dr at Scott St in rep	erence to a pine
Crash. Upon arrival It was determined	•
two people inside the plane prior to the	
The property of the property o	
CRIME DETAIL	
Method of Entry  Forced  Unlawful Entry Non-Force  Attempted Forcible Entry  Method of Attack  Firearm  Cutting Tool  Hands/Fist/Feet	Robbery Force  Firearm Strong Arm  Knife Other Weapon
Entered GCIC: Date:	1 - 0
Admin Cleared Arrest Ex-Cleared Suspended Unfounded	
Reporting Officer: Escalante 57 Approving Officer:	t
Forward to CID File Follow up by reporting officer: Co	py to: HENOPY SSB 008
<i> </i> υ ,	

INVESTIGATIVE REPORT
GA0690100 Incident #: 2014-0038
Date: 10/10/14  On 10/10/14, 1 (ofc. Escalante # 57) was dispatched to
the area Palmour Dr at Scott St in reference to
a plane Crash. Upon arrival it was determined that
there were two people inside the plane prior to the
Crash.
I then made contact with a witness (Flair Lee) who
Stated that he heard a plane and looked up and
noticed it was very low over the building. Mr. Lee
then Stated the plane hit a power pole and did
a nose dive into the roadway (Palmour De.). Mr Lee
Says he told someone to call 911 then ran to the
Plane and pulled one male out of the plane.
He Purther stated that he attempted to pull the
Other person out of the plane but could not
get to them because of the fire and heat.
Je in the ment of the man in the
The one passenger was identified as Kelly Chardler
and the Other was identified as Lawrence Youhanaian
Mr. Chardler was airlifted to Grady Hospital. Mr.
You handian was decleared deceased at the scene.
The second of the second

Soft Smith notified the Coroner at 1222 hours. LT Ford Contact FAA and NTBS at 1211 pm. Also see attached Other written Statement from wit Reporting Officer: Escalante

**Print Name** 

Signature

Supervisor Approval