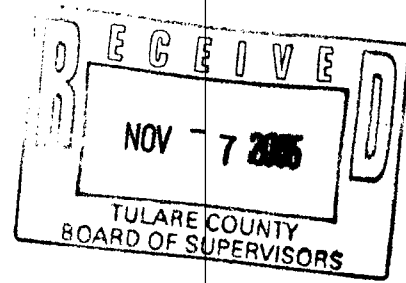


Marilu Lopez  
878 W. Mariposa Street  
Lindsay, California. 93247  
(559) 756-3206.




To whom it may concern:

My name is Marilu Lopez. On October 29, 2005., I received a Denial of Application for Public Dance Business License from the office of the tax collector. I submitted an application on October 12, 2005 with the Tulare County Resource Management Agency and was given a Building Permit No: A0503661., for a 10,000 gallons water tank and up to this day I am still awaiting for an answer from the County.

I am working on it, I have been inquiring about my permit in person and making phone calls. I was notified today that I will receive the permit to install the water tank, it will be ready in this week or the next few days. The entrance and exit signs are posted, the lightbulb has been fixed. I am working on making the necessary improvements to my business so that it will have a better appearance and I also have security guards available upon request.

Sincerely,

  
Marilu Lopez.

**TULARE COUNTY RESOURCE MANAGEMENT AGENCY**  
5961 SOUTH MOONEY BOULEVARD  
VISALIA, CALIFORNIA 93277-9394

**INFORMATION SLIP**

CHECKING ON YOUR BUILDING PERMIT APPLICATION

PERMIT NO. A0903661

CALL 733-6291 OR 733-6282

AND IF YOU'RE CALLING LONG DISTANCE  
YOU MAY CALL TOLL-FREE AT 1-800-228-6133.  
WE WILL LET YOU KNOW IF YOUR PERMIT IS READY!

HAVE A NICE DAY!

*Submitted on October 12th, 2005*

BOARD OF SUPERVISORS / COUNTY ADMIN.  
COUNTY OF TULARE

ADMINISTRATION BUILDING  
2800 W. BURREL AVE.  
VISALIA, CA 93291  
PHONE (559) 733-6271 or (559) 733-6531

Date 11/7/05

Marilyn Lopez  
Name

878 W. Mariposa St.  
Address

Lindsay  
City/State

CA 93247  
Zip

| Description | Amount |    |
|-------------|--------|----|
| Appeal Fee  | 300    | 00 |
| (cash)      |        |    |
|             |        |    |
|             |        |    |
|             |        |    |
|             |        |    |
|             |        |    |
| Total       | 300    | 00 |

BS-2

Received By Wanna K. Bush

2078

# COUNTY OF TULARE

Office of the Treasurer/Tax Collector

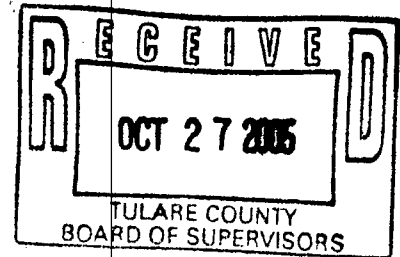


O. Gerald Fields  
Treasurer/Tax Collector

October 26, 2005

William F. Shearer, Jr., C.P.A.  
Assistant Treasurer/Tax Collector

Marilu Lopez  
878 W Mariposa  
Lindsay CA 93247



RE: Denial of Application for Public Dance Hall Business License

Dear Ms Lopez,

Pursuant to Tulare County Ordinance Code, §6-03-1020 and §6-03-1030, the Tulare County Sheriff Office, Resource Management Agency (Planning Department) and the Tulare County Fire Department (Fire Warden) has directed the Tax Collector to deny your application for a Public Dance Hall Business License.

**REASON FOR DENIAL:**

Tulare County Sheriff's Office - Not in the best interest of Public Safety.

Resource Management Agency - PSP-02-001 Non-Compliance with conditions of Special Use Permit, Sections 12, 14, 15, 20 & 27 (Copy Attached)

Tulare County Fire Department - Lack of 10,000 Gal. Water Storage Tank for Fire Protection

You may apply to the Board of Supervisors of Tulare County for a review of this action, pursuant to Tulare County Ordinance Code, §6-1080 and §165, by filing with the Clerk of the Board of Supervisors, 2800 W Burrell Ave, Visalia, CA 93291, a written appeal within ten (10) calendar days after the mailing of this notice.

In the event you request the Board of Supervisors to review the action, the Clerk of the Board will notify you, not later than fifteen (15) days after the date on which the appeal was filed, of the time and place of the hearing on your appeal. At the hearing, the Board of Supervisors will consider all matters set forth in the application and the reports of the investigating officers, and shall consider the evidence presented at the hearing by you (the appellant), the Tax Collector, the investigating officers, and all other persons who desire to be heard concerning the matter. At the hearing you are entitled to be present and to be represented by counsel. The Board may continue the hearing from time to time without giving you written notice. After the conclusion of the hearing, the Board will issue its decision on the appeal; which decision shall be final.

Sincerely,

O Gerald Fields  
Tulare County Tax Collector

By:  Deputy Tax Collector

Cc: Board of Supervisors, Sheriff's Office, Planning Commission, Health Officer, Fire Warden,  
County Counsel

# County of Tulare

Office of the Treasurer/Tax Collector



O. Gerald Fields  
Treasurer/Tax Collector

William F. Shearer, Jr., C.P.A.  
Assistant Treasurer/Tax Collector

O. Gerald Fields  
Tulare County Tax Collector

## Application for Public Dance and Dance Hall License

Under Tulare County Ordinance Codes §6-03-1465

Single Dance License ( )

Annual Dance License ( X )

The undersigned hereby applies for a Public Dance/Dance Hall license pursuant to the Ordinance Code of Tulare County, and makes the following statements:

Applicant: Marilo Lopez

Address: 878 W. Main St. Lindsay CA 93247

City, State Zip: Lindsay CA 93247

Residence Telephone No: 559-756-3206

Business Name: El Campesino

Business Address: 807 S. Mirage Av Lindsay CA

City, State Zip: Lindsay CA 93247

Business Telephone No: cell 756-3206

### Personal Description:

Date of Birth 1-1-64 Place of Birth Mexico

Sex F Hair Brown Eyes Brown Height 5'03 Weight 137

Social Security No: 621-09-6789 Drivers License No: C3832992

In case of emergency, notify: Soledad Acevedo

List complete Name, Address, and Telephone number of all employers for the past five (5) years:

1. SELF Employ
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

List complete Name, Address and Telephone Number of five (5) character references: 747-6129-CP-932

1. Soledad Acevedo 355 W Costener Family
2. Bekit Sims 508 S Mirage Lindsay CA 93247, 562-3434
3. Raynelle Silva 175 E. Honolulu Lindsay CA 93247, 562-7912
4. Sara Cardenas 1009 Denver St # B Lindsay CA 93247-56275
5. Jaime Caro 865 Buxem Lane Lindsay CA 93247-310 0386

Names, Addresses, Telephone Numbers of any partners or Associates:

N/A

The applicant further states hereto, as indicated by initialing each statement:

1. ML That he/she is the individual who will actively operate the business under this license.
2. ML That he/she is deemed to be the authorized agent of all interested parties for the purpose of receiving any notice required by the ordinance under which this...

3. MLC That he/she has never been charged or convicted of any felony at any time except as detailed on the reverse side of this application.
4. MLC That he/she had not been convicted of any misdemeanor, excluding non-moving traffic violations, within the previous ten (10) years, nor has been charged with any misdemeanor, excluding non-moving traffic violations, within the previous five (5) years, except as detailed on the reverse side of this application.
5. BAL That neither he/she nor any person participating in this business has been denied a license at any time for a public dance, or had such a license suspended or revoked by the authorities of any County or City in the State of California, except as detailed on the reverse side of this application.
6. MLC That the application is for an annual license or a single dance license.
7. MLC Details concerning any other business that will be conducted in conjunction with the public dance are as follows: Bar - Serving <sup>Beer</sup> Alcoholic / Non-Alcoholic Beverages, Pool table's, live music
8. MLC That the floor plan attached hereto is drawn to scale and shows the following:
- 1) Area of floor where dancing is to be permitted
  - 2) Location and size of exits
  - 3) Direction in which exit doors open
  - 4) Location of drinking fountains
  - 5) Location of restrooms and other sanitation facilities
  - 6) Area of floor to be used for handling and serving food and beverages.

I, Marile Lopez, the undersigned, declare under penalty of perjury that I am the applicant, that I have read the foregoing application and know the contents thereof, and that the foregoing is true and correct of my own knowledge.

Executed on 7-21-05 at Visalia CA 93291

Marile Lopez  
Signature of Applicant

Attachment: ☒ Floor Plan

RECEIPT is hereby acknowledged of the sum of Sixty Dollars (\$60.00) from the above named applicant, as the application fee provided for in §6-03-1015 of the Tulare County Ordinance Code.

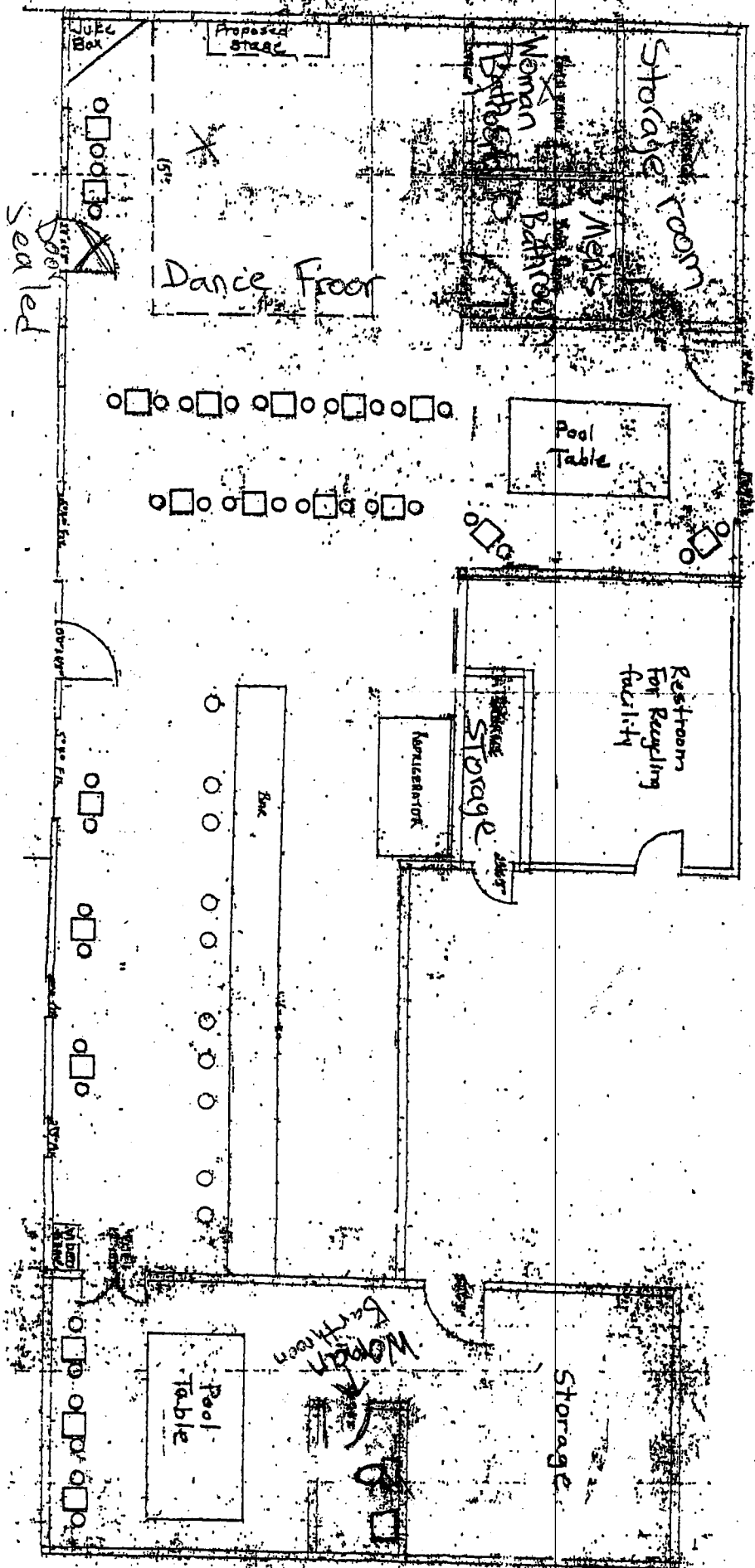
**O Gerald Fields**

Tulare County Treasurer/Tax Collector

By: K.L. Hill  
Deputy Tax Collector

|                |                   |  |
|----------------|-------------------|--|
| FEES REQUIRED: | Application       | \$60.00  |
|                | Sheriff's Dept    | \$10.00 Processing                                     |
|                | Dept of Justice   | \$32.50 <b>Money Order only</b> (processing)           |
|                | License completed | \$100.00 FY/\$20.00 Event Due when application process |

Distribution:  
Applicant  
Tax Collector  
Sheriff  
Health & Human Services Agency  
Resource Management Agency



**SITE PLAN**  
**PSP 02-001**  
**EXHIBIT "A"**  
**SHEET 2 OF 2**



**SITE PLAN**  
**PSP 02-001**  
**EXHIBIT "A"**  
**SHEET 1 OF 2**



# CASHIER'S COLLECTION SHEET

MANDATORY APN / ID#: 208-030-010-000 EL CAMPANSINO

DATE: 7/21/2005 INITIALS: klg

|                  | AMOUNT PAID | 1 or 2 | DESCRIPTION                      |
|------------------|-------------|--------|----------------------------------|
| TRANS CODE: 5000 | \$60.00     |        | BUSINESS LICENSE APPLICATION FEE |
| TRANS CODE:      |             |        | #N/A                             |
| TRANS CODE:      |             |        | #N/A                             |
| TRANS CODE:      |             |        | #N/A                             |
| TRANS CODE:      |             |        | #N/A                             |
| TRANS CODE:      |             |        | #N/A                             |
|                  | \$60.00     |        |                                  |



# POSTAL MONEY ORDER

$$\begin{array}{r} 15-800 \\ \hline 000 \end{array}$$
[illegible]

\* \* \* \* \* THIS PARCEL IS IN DEFAULT\* \* \* \* \*

AS10 SECURED ASSESSMENT ROLL - ASMT INQUIRY 07/21/2005

ASMT: 208 030 010 000 ESC YR: FEE ASMT: 208 030 010 000  
STATUS: TAX BILL PRINT: 00 00 0000 BASE ASMT: 208 030 010 000  
OWNER: LOPEZ MARILU ACTION:  
ASSESS: LOPEZ MARILU CODE AREA: 108 003  
ADDRESS: DBA EL CAMPANSINO SUPL CNT: 0  
878 W MARIPOSA ST EVENT DT:  
LINDSAY CA 93247

1ST: 0.00 00/00/0000 DUE  
2ND: 0.00 00/00/0000 DUE

SIT 1/2: 807 S MIRAGE AVE LINDSAY

CORTAC#: BANKPCY: 00 00 0000 NO: TYPE: REMOVD: 00 00 0000  
RC # CHGE DATE ID R&T DESCRIPTION BILL TYPE XREF  
00000 06/22/2005 20803010000SO OLD #

DFLT DT: 06 30 2005 DFLT #: 003482 NOTICE DT: 00 00 0000 REDEEMED: 00 00 0000  
F1=INDEX BY FEE F2=SEC DELINQ ROLL F3=PRINT BILL F4=VALUES F5=TAX DATA  
F7=RETURN F8=NAME/ASMT INQ F9=NAME INDEX P11=PRIOR 5 ROLLS PA1=NEXT ASMT

0202  
PRPOQX

COUNTY OF TULARE  
REDEMPTION PRIOR SECURED TAX ROLL

07/21/2005  
13:35:28

APN: 208 030 010 000

OWNER: LOPEZ MARILU  
ASSESS: LOPEZ MARILU  
ADDRESS: DBA EL CAMPANSINO  
878 W MARIPOSA ST  
LINDSAY CA 93247

FEE ASSMT: 208-030-010-000  
BASE ASMT: 208-030-010-000  
CODE AREA: 108-003  
P.P. DATE:  
P.P. INST:

CURR DATE: 07/21/2005

REDPT: 600.73  
P.P.: 120.15

SIT 1/2: 807 S MIRAGE AVE LINDSAY

DFLT DATE: 06/30/05 DFLT# 053482 \$ AMT 577.98 NOTICE: 00/00/00  
RED 00/00/00

REDEMPTION SCHEDULE

|     |        |     |        |     |        |             |
|-----|--------|-----|--------|-----|--------|-------------|
| JUL | 600.73 | NOV | 631.71 | MAR | 662.69 | BANKRUPTCY: |
| AUG | 608.47 | DEC | 639.45 | APR | 670.43 | BKCY DATE : |
| SEP | 616.22 | JAN | 647.20 | MAY | 678.18 | BKCY NO :   |
| OCT | 623.96 | FEB | 654.94 | JUN | 685.92 |             |

APN: 208-030-010-000

LOPEZ MARILU

\*\*\*\*\* REDEMPTION TAX & PENALTY INFORMATION \*\*\*\*\*

| PARCEL NUMBER | YEAR     | T I C<br>Y N O | TOTAL  | PENALTY | COST  | REDEMPTION<br>PENALTY | TOTAL  |
|---------------|----------|----------------|--------|---------|-------|-----------------------|--------|
| 208030010000  | 04 04-05 | I B Y          | 516.36 | 51.62   | 10.00 | 7.75                  | 585.73 |
|               |          |                | 516.36 | 51.62   | 10.00 | 7.75                  | 585.73 |

PD007

COUNTY OF TULARE  
PROPERTY SYSTEM  
ASSESSOR INQUIRY07/21/05  
13:35:45.8

## BUSINESS

PARCEL: 208 030 010 000 STATUS: A 06/25/93 CREATED: 0000 06/25/93  
SEC TRA: 108003 KILLED:  
DESC: POR N/2 OF NE/4 SEC 18-20-27 ZONING:

ASSMT: 208 030 010 000 STATUS: A 06/25/93 CREATED: 0000 06/25/93  
TRA: 108003 TAX CD: 001 BASE: 00/00 KILLED:  
CUR DOC: 2000R46651 07/28/00

DESC: POR N/2 OF NE/4 SEC 18-20-27  
LOPEZ MARILU  
878 W MARIPOSA ST  
LINDSAY CA 93247

ROLL ASSESSEE: N  
RETAINED OWNER:  
ACRES: 0.00  
ET AL OWNERS: N  
SUPL CNT:  
20803010000SO

## COMMENT:

SITUS: 807 S MIRAGE AV LIN

OPTION: \_\_\_\_\_  
NXT OWN PCL SIT EXP TAX PRE RET  
SC2 ATT HON APR MEN HLP SAL

ALL OWNERS FOR THIS ASMT HAVE BEEN DISPLAYED  
PD010 COUNTY OF TULARE  
ASSESSOR INQUIRY  
CURRENT OWNERSHIP  
=====

07/21/05  
13:35:49.3

ASSESSMENT: 208 030 010 000 FEE ASSMT: 208 030 010 000 OWNERSHIP: 100.000

ASSESSEE: LOPEZ MARILU

SEL OWNER NAME TYPE PERCENT DOCUMENT  
LOPEZ MARILU 100.000 2000R46651 07/28/00

-----  
SEL FIELD = X AND PF1 FOR DOCUMENT HISTORY (RECORDED) PF9 OR ENTER = RETURN

# County of Tulare

Office of the Treasurer/Tax Collector



O. Gerald Fields  
Treasurer/Tax Collector

William F. Shearer, Jr., C.P.A.  
Assistant Treasurer/Tax Collector

## Application for Public Dance/Dance Hall License

DATE: JULY 21, 2005

APN: 208-030-010-000

NAME OF APPLICANT: Marilu Lopez

NAME OF BUSINESS: El Campesino

### Report from Tulare County Sheriff:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_  
Sheriff's Department Investigating Officer

### Report from Tulare Resource Management Agency (Planning Dept):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_  
Resource Management Agency Investigating Officer

### Report from Tulare County Health & Human Services Agency (Environmental Health):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_  
Health & Human Services Agency Investigating Officer

### Report from Tulare County Fire Warden:

Date: \_\_\_\_\_

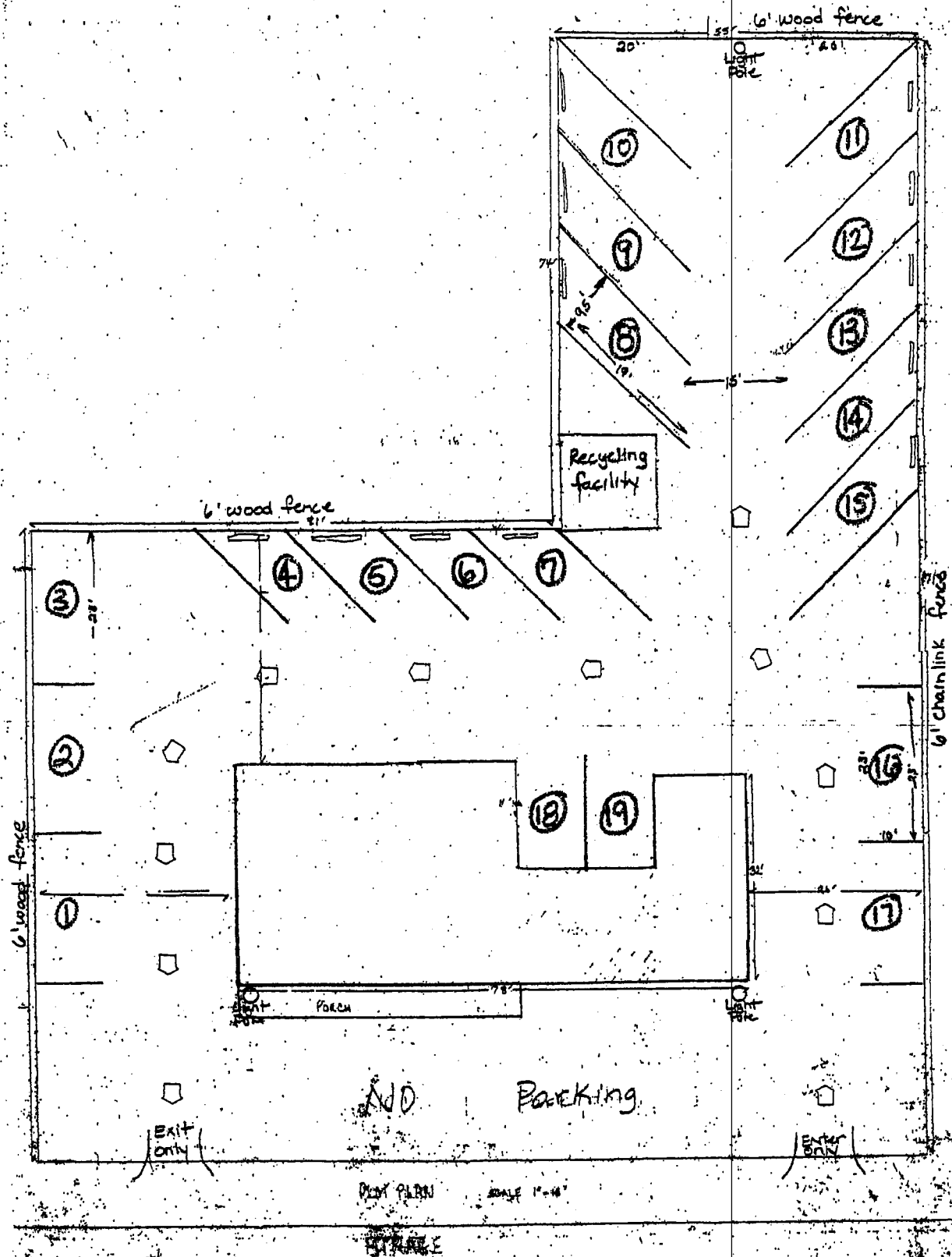
Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

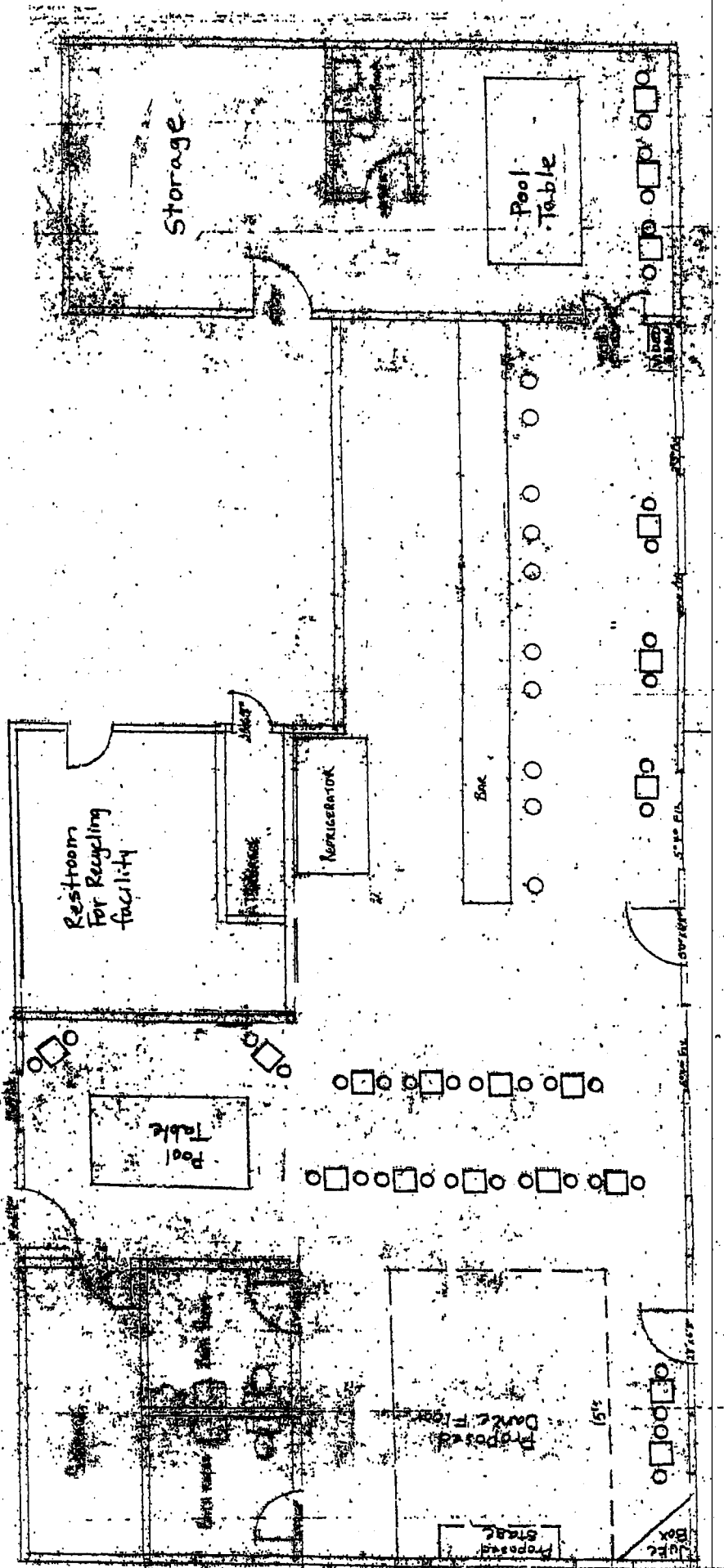
By: \_\_\_\_\_  
Fire Warden Investigating Officer





NO SCALE

**SITE PLAN**  
**PSP 02-001**  
**EXHIBIT "A"**  
**SHEET 1 OF 2**



**SITE PLAN.**  
**PSP 02-001**  
**EXHIBIT "A"**  
**SHEET 2 OF 2**



# County of Tulare

Office of the Treasurer/Tax Collector

Chk # \_\_\_\_\_ Amt \$ \_\_\_\_\_

SEP 21 2005



O. Gerald Fields  
Treasurer/Tax Collector

William F. Shearer, Jr., C.P.A.  
Assistant Treasurer/Tax Collector

## Application for Public Dance/Dance Hall License

DATE: JULY 21, 2005

APN: 208-030-010-000

NAME OF APPLICANT: Marilu Lopez

NAME OF BUSINESS: El Campesino

### Report from Tulare County Sheriff:

Date: 9-21-05

Approval:

Denial:

Reason for Denial:

Not in the best interest of Public Safety

By: DETECTIVE MERRILL

Sheriff's Department Investigating Officer

### Report from Tulare Resource Management Agency (Planning Dept):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Resource Management Agency Investigating Officer

### Report from Tulare County Health & Human Services Agency (Environmental Health):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Health & Human Services Agency Investigating Officer

### Report from Tulare County Fire Warden:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Fire Warden Investigating Officer

# TULARE COUNTY SHERIFF'S DEPARTMENT

[ ] CRIME REPORT

[X] INCIDENT REPORT

[ ] WARRANT

SEP 21 2005

CASE NUMBER

05-13810

STATISTICAL CATEGORY

☐ AG CRIME ☐ NARCOTICS ☐ GANG ☐ HATE CRIME ☐ DOMESTIC ☐ JUVENILE ☐ CORRECTIONS

SECTION

INCIDENT

DEFINITION

DANCE HALL LICENSE

Tulare County Tax Collector

By Deputy

N/A

TYPE

9290

LOCATION OF OCCURRENCE

807 S. MIRAGE

BEAT

20A / LINDSAY

PROPERTY LOSS & PROPERTY DAMAGE

N/A

DATE OCC.

FROM TO:

7-21-05

TIME OCC.

FROM TO:

N/A

DAY OCC.

THURSDAY

DATE / TIME DISP

N/A

TIME ARR

N/A

TIME COMP

N/A

CODE

NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS

APPLICANT

LOPEZ, MARILU

DATE OF BIRTH

1-1-64

SEX

F

RACE

H

RESIDENCE ADDRESS

878 W. MARIPOSA - LINDSAY

OCCUPATION/BUS ADDRESS

BUSINESS OWNER

RESIDENCE PHONE

559-756-3206

CODE

NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

SUSPECT

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

ADDRESS / POSSIBLE LOCATION

RESIDENCE PHONE

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

ADDRESS / POSSIBLE LOCATION

RESIDENCE PHONE

VEHICLE

VIC [ ]

SUS. [ ]

YEAR

MAKE

MODEL

COLOR

STYLE

LICENSE

STATE

NAME OF R / O

VIC - SUS

ADDRESS OF R / O

VIC - SUS

OTHER VEHICLE INFORMATION

ODOR OF ALCOHOL  
YES NO

ABLE TO CARE FOR SELF  
YES NO

SPEECH  
[ ] NORMAL  
[ ] SLURRED  
[ ] INCOHERENT

CLOTHING  
[ ] NORMAL  
[ ] SOILED  
[ ] DISARRANGED

BALANCE  
[ ] GOOD  
[ ] POOR  
[ ] UNSTEADY

ATTITUDE  
[ ] COOPERATIVE  
[ ] ANTAGONISTIC  
[ ] ANGERY

NARRATIVE

SEE ATTACHED NARRATIVE.

VICTIM OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☐ NO

CASE STATUS [ ] ACTIVE [X] INACTIVE [ ] CLOSED [ ] UNFOUNDED

NON-PROS Y (N)

NEWS REL Y (N) COPIES TO: DET PAT D/A JUV CPS OTHER

SUP-RESP Y (N)

LAB-RESP Y (N)

DET-RESP Y (N)

REPORTING OFFICER

I.D. #

DATE/TIME

REVIEWED BY:

DATE

G. MERRILL

M3825

8-24-05/1500

G. T. WATSON

8-26-05

**TULARE COUNTY SHERIFF OFFICE**  
**5400**

**CASE NO. 05-13810**

**CONTINUATION REPORT**

**PAGE NO.**

**CODE SECTION**

**1**

**Incident**

**Applicant:**

**Address:**

**Telephone:**

Marilu Lopez

878 W Mariposa, Lindsay

756-3206

On 08-19-05, at approximately 1000 hours, I was contacted by Sgt. Watson, who advised me I needed to look into this application for a Public Dance/Dance Hall License. The applicant in this case is Marilu Lopez for the El Campesino Bar.

On 08-24-05, at approximately 0900 hours, I began my investigation on Marilu Lopez. I ran a rap, a warrant check, and a driver's license check on Marilu and also ran a prior history through CAD on the bar. Marilu does not have a criminal history, does not have any warrants, and has a valid driver's license in the state of California. After reviewing the call history of the bar, the following was found. This is based on one year's activity at the bar, from 07-01-04 to 08-24-05:

There were a total of 20 calls for El Campesino bar within that time.

(2) arrests made for a subject drunk in public (case numbers 04-11116, 04-17649).

(4) calls for disorderly conduct (fights) with (2) case numbers drawn (04-18021, 04-18492).

(1) call regarding an assault, robbery, and a car jacking. Case number (05-12421)

(1) call regarding as an assist another agency, Alcoholic Beverage Control, regarding strippers inside of the El Campesino bar (04-15685).

The remaining calls to El Campesino bar varied from bar checks, vandalisms, stake-outs, warrant services, and drunk drivers seen in the area. For a more detailed description, refer to the attached CAD printout. Copies of the reports with the above case numbers are attached.

There was also an undercover operation by Tulare County Narcotics Division and ABC conducted at the El Campesino bar in 2005. Through this undercover investigation, it was found there were narcotics sold to undercover officers by security guards. It was also found that the female bartender was soliciting prostitution. It was also found that minors were able to go into the bar and drink. This case is still under investigation by Tulare County Narcotics Division (TCSO Case Number 05-60088) and ABC.

At approximately 1030 hours, I contacted Susan Cavazos, who works for ABC. She advised me the El Campesino bar has been owned and operated by Marilu Lopez since 12-12-2000. She also advised Marilu only has a beer license, which is currently up to date. She then transferred me to John Acosta, who also works for ABC.

**REPORTED BY:**

**DATE:**

**REVIEWED BY:**

**DATE:**

Det. G. Merrill M3825

August 24, 2005

TRANSCRIBED BY: scm

H:\2005supp\0513810\_gm

TULARE COUNTY SHERIFF OFFICE  
5400

CASE NO. 05-13810

CONTINUATION REPORT

PAGE NO.

CODE SECTION

2

Incident

Applicant:

Address:

Telephone:

Marilu Lopez

878 W Mariposa, Lindsay

756-3206

1 I explained to John what I was looking into regarding the El Campesino bar and he was  
2 familiar with the bar. I asked him if he could please send me any information or contacts that he has  
3 had within the last year involving El Campesino bar.  
4

5 At 1230 hours, I began to call the five listed references on the application form. The first  
6 person contacted was Biljit Singh, DOB 12-12-1965. I explained to Biljit why I was calling and was  
7 going to ask him questions about Marilu Lopez and the dance hall she is trying to open. He said he  
8 was familiar with the situation and has known Marilu for approximately four and a half years. Biljit  
9 advised he is the owner of the Texaco station and the 99 cent store in Lindsay. He said the only  
10 contact he has with Marilu is when she comes into the Texaco station or the 99 cent store. He  
11 considers her to be a friend and, from what he knows of her, thinks she is a honest person and will  
12 be able to run the dance hall effectively. I asked if he had anything else to add about Marilu's  
13 reputation. He said he did not.  
14

15 At 1245 hours, I contacted Soledad Acevedo, DOB 07-09-1966. Soledad advised Marilu is  
16 her sister. She said she is aware that her sister is trying to open a dance hall at the El Campesino bar.  
17 Soledad said her sister is a good person and believes her to be able to run a dance hall and obey all  
18 laws. She said Marilu is respectful and does not believe there will be any problems. Soledad  
19 advised she has been to the El Campesino bar before to help out her sister and encountered no  
20 problems while she was there.  
21

22 At 1300 hours, I contacted Sarah Cardenas, DOB 04-08-1971. She advised Marilu is a part  
23 of her family and thinks Marilu is trustworthy and honest. Sarah advised, when they get together for  
24 family functions, Marilu is kind and respectful. I asked if there was anything further she could add.  
25 She said she thinks Marilu can run a dance hall without any problems.  
26

27 At 1310 hours, I contacted Jaime Caro. Jaime advised me he knows Marilu through her son.  
28 He said he did not know he was going to be a reference on the license, nor did he have any  
29 knowledge that she wanted to open this dance hall. Jaime advised he does believe she is trustworthy  
30 and respectful and he has seen this when he has gone to her house to visit with her son. I asked  
31 Jaime if he ever does any other activities with Marilu, besides visiting her son. He said no. I asked  
32 him if there was anything else he wanted to add in reference to Marilu. He said no.  
33

REPORTED BY: *g*

DATE:

REVIEWED BY:

DATE:

Det. G. Merrill M3825

August 24, 2005

*SGT WATSON*

*8-26-05*

TRANSCRIBED BY: scm

H:\2005supp\0513810\_gm

## TULARE COUNTY SHERIFF OFFICE

CASE NO. 05-13810

5400

## CONTINUATION REPORT

PAGE NO.

CODE SECTION

3

Incident

Applicant:

Address:

Telephone:

Marilu Lopez

878 W Mariposa, Lindsay

756-3206

At 1530 hours, Raynelle Silva returned my call at the Porterville Substation. I advised her I was contacting her regarding her listed as a reference by Marilu Lopez. Raynelle advised her Marilu did ask if she could use her as a reference, but she did not know what it was for and was not aware of the dance hall. I asked her how long she has known Marilu. She said for five years. She only knows Marilu through her being a customer of Marilu's. Raynelle advised she works for Lindsay Print and Copy. She has done work for Marilu, such as making business cards for her and she is always current with her billing. She believes Marilu is a honest person and advised me she really does not know anything else about her. I asked her if she had anything else to add. She said no.

At 1615 hours, I responded to the El Campesino bar in hopes to contact Marilu Lopez. It was found that Marilu resides just south of the bar at 825 S Mirage and I contacted her there. I advised Marilu I was the investigating officer looking into her dance hall license and asked her what her plans were. She advised she plans to have two security guards on at all times during weekend hours only, because that is when they are the busiest. She said the dance floor that she is getting the license for is located at the southern portion of the bar and her bar occupancy is 49 people. She advised she will keep track of the people coming in so that number will not be exceeded. I asked her what her business hours are. She advised me Wednesday to Monday, 1700 to 0200 hours. Marilu said, if the license gets accepted, she does not believe problems will come from it. I advised her I would be coming in at a later time to see inside of her bar when it was open.

At 2040 hours, I responded to the El Campesino bar, during its nighttime operating hours. As I pulled up, I observed the bar to be a single story dwelling, facing east. I observed two streetlights, one being on the north side of the bar and one on the south side of the bar. I then proceeded to go to the back side of the bar, which was to the west. I observed two lights, one underneath a patio and the other attached the northern portion of the bar. The ground cover was dirt and Marilu advised this is where customers park their vehicles. She advised she has a security guard back there at all times, directing people where to park, so people can come and go as they please.

Marilu and I then went inside the bar. I observed the following. There was an open sitting area and a pool table located on the northern portion of the bar. The middle of the bar area was the actual bar, where they served drinks, and seating, which included approximately six to eight tables. The southern portion of the bar was where she was going to have the dance floor. The dance floor

REPORTED BY: *RM*

DATE:

REVIEWED BY:

DATE:

Det. G. Merrill M3825

August 24, 2005

SGT WATSON

8-26-05

TRANSCRIBED BY: scm

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TULARE COUNTY SHERIFF OFFICE  
5400

CASE NO. 05-13810

CONTINUATION REPORT

PAGE NO.

CODE SECTION

4

Incident

Applicant:  
Marilu Lopez

Address:  
878 W Mariposa, Lindsay

Telephone:  
756-3206

1 was approximately 15 by 12 feet. I observed a circular, elevated platform in the middle of the dance  
2 floor with a pole leading up to the ceiling, where it was affixed to the ceiling. I asked Marilu what  
3 elevated platform and pole was used for. She said for people to sit down and also dance on. There  
4 was also a woman's and a men's bathroom. Just to the west of the dance floor area was a small  
5 room with another pool table in it. At that time, there was nothing else to see inside of the bar.  
6

7 I asked Marilu who lived in the back of her residence. She advised me her family did. I  
8 thanked her for her time and cleared the scene.  
9

10 On 08-25-05, at 1400 hours, I was contacted by Jaime Hernandez, who is the owner of the  
11 El Caribe bar just south of the El Campesino. I advised Jaime that I was contacting him regarding  
12 any problems he has had with the El Campesino bar. He stated he believes there are strippers that  
13 frequent the bar and also the customers park in his parking lot. Jaime advised, when the customers  
14 come back to their cars, they sometimes start fights in the parking lot. Jaime advised me these are  
15 the main concerns she has and had nothing further to add at the time.  
16

17 After conducting my investigation, I believe that the dance hall license will be detrimental  
18 to the public safety and morals. This is based on the known prostitution, drug sales, and minors  
19 drinking at the El Campesino bar.

REPORTED BY: *a*  
Det. G. Merrill M3825

DATE: August 24, 2005

REVIEWED BY:

DATE:

*SGT WATSON 8-26-05*

TRANSCRIBED BY: scm

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Department of Alcoholic Beverage Control  
Fresno District Office  
3640 East Ashlan Avenue  
Fresno, CA 93726  
Phone: 559-225-8334  
Fax: 559-225-8740

Paid  
Chk # \_\_\_\_\_ Amt \$ \_\_\_\_\_

SEP 21 2005

O Gerald Fields  
Tulare County Tax Collector  
By \_\_\_\_\_ Deputy

State of California  
Arnold Schwarzenegger, Governor  
Business, Transportation & Housing Agency  
Sunne Wright McPeak, Secretary



## FAX TRANSMISSION

Total Number of Pages 5 (Including this cover sheet)

Original: ☐ To follow by regular mail ☐ Will not follow

To: DETECTIVE GREG MERRILL

Firm/Office: \_\_\_\_\_

Fax: \_\_\_\_\_ Date: 9-16-05 Time: 1045

cc('s): \_\_\_\_\_

From: Phil Lundell Phone: \_\_\_\_\_

Subject: \_\_\_\_\_

Comments: COPY OF ACCUSATION WE ARE FILING ON THE CAMPESINO BAR

### NOTICE

This communication is intended only for the use of the individual or entity to which it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone, and return the original message to us at the above address.



"Be Energy Efficient"

BEFORE THE  
DEPARTMENT OF ALCOHOLIC BEVERAGE CONTROL  
OF THE STATE OF CALIFORNIA

IN THE MATTER OF THE ACCUSATION AGAINST

LOPEZ, Marilu Bernardina

DBA: Campesino

PREMISES: 807 S. Mirage Ave.  
Lindsay, CA 93247

} FILE 40-371352

} REG.

} ACCUSATION  
} UNDER ALCOHOLIC BEVERAGE  
} CONTROL ACT AND STATE  
} CONSTITUTION

LICENSE(S): On-Sale Beer

I hereby complain and accuse the above respondent(s), holding the above license(s), based on the following statement of facts:

COUNT 1

On or about April 29, 2005, respondent-licensee by his agent or employee sold, furnished or offered to sell or furnish within the premises, a controlled substance, to wit: Methamphetamine, in violation of Health and Safety Code Section 11379.

COUNT 2

On or about April 29, 2005, respondent-licensee knowingly permitted the illegal sale, or negotiations for such sales, of narcotics or dangerous drugs upon the licensed premises, in violation of Business and Professions Code Section 24200.5(a).

COUNT 3

On or about April 30, 2005, respondent-licensee, during business hours, employed or used the services of Rode Ortiz Noriega, a person under the age of 21 years, in a portion of the premises primarily designed and used for the sale and service of alcoholic beverages for on-premises consumption, in violation of Business and Professions Code Section 25663(a).

COUNT 4

On or about May 7, 2005, respondent-licensee, during business hours, employed or used the services of Rode Ortiz Noriega, a person under the age of 21 years, in a portion of the premises primarily designed and used for the sale and service of alcoholic beverages for on-premises consumption, in violation of Business and Professions Code Section 25663(a).

RECEIVED  
AUG 19 2005  
Dept. of Alcoholic Beverage Control  
Fresno

COUNT 5

On or about May 7, 2005, respondent-licensee permitted a female identified only as "Shakira", an entertainer, whose breasts and/or buttocks were exposed to view, to perform while not on a stage 18 inches above the immediate floor level and removed a least six feet from the nearest patron, upon the premises, in violation of California Code of Regulations Title 4, Division 1, Section 143.3(2).

COUNT 6

On or about May 7, 2005, respondent-licensee by his agent or employee sold, furnished or offered to sell or furnish within the premises, a controlled substance, to wit: Methamphetamine, in violation of Health and Safety Code Section 11379.

COUNT 7

On or about May 7, 2005, respondent-licensee knowingly permitted the illegal sale, or negotiations for such sales, of narcotics or dangerous drugs upon the licensed premises, in violation of Business and Professions Code Section 24200.5(a).

COUNT 8

On or about May 8, 2005, respondent-licensee permitted a patron to sell, within the premises, a controlled substance, to wit: Methamphetamine, in violation of Health and Safety Code Section 11379.

COUNT 9

On or about May 8, 2005, respondent-licensee knowingly permitted the illegal sale, or negotiations for such sales, of narcotics or dangerous drugs upon the licensed premises, in violation of Business and Professions Code Section 24200.5(a).

COUNT 10

On or about May 8, 2005, respondent-licensee by his agent or employee sold, furnished or offered to sell or furnish within the premises, a controlled substance, to wit: Methamphetamine, in violation of Health and Safety Code Section 11379.

COUNT 11

On or about May 8, 2005, respondent-licensee knowingly permitted the illegal sale, or negotiations for such sales, of narcotics or dangerous drugs upon the licensed premises, in violation of Business and Professions Code Section 24200.5(a).

SEP-16-2005 10:00 HDL JDS 220 0140 F.04  
LOPEZ, Marilu Bernardina  
File #40-371352  
Pg. 3

COUNT 12

On or about May 14, 2005, respondent-licensee by his agent or employee sold, furnished or offered to sell or furnish within the premises, a controlled substance, to wit: Methamphetamine, in violation of Health and Safety Code Section 11379.

COUNT 13

On or about May 14, 2005, respondent-licensee knowingly permitted the illegal sale, or negotiations for such sales, of narcotics or dangerous drugs upon the licensed premises, in violation of Business and Professions Code Section 24200.5(a).

COUNT 14

On or about May 14, 2005, respondent-licensee, during business hours, employed or used the services of Rode Ortiz Noriega, a person under the age of 21 years, in a portion of the premises primarily designed and used for the sale and service of alcoholic beverages for on-premises consumption, in violation of Business and Professions Code Section 25663(a).

COUNT 15

On or about May 14, 2005, respondent-licensee(s) by her agent, employee or servant, Araceli Creque, suffered and permitted the said premises to be used as a place wherein, Araceli Creque, did solicit, Detective Bonilla and Detective Zaragoza to engage in an act of prostitution, in violation of Section 647(b) of the Penal Code.

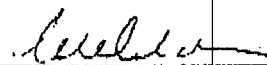
LOPEZ, Marilu Bernardina  
File #40-371352  
Pg. 4

Licensee(s) Previous Record: Licensed as above since December 12, 2000, with no record of disciplinary action.

(1) That by reason of the foregoing facts, grounds for suspension or revocation of such license(s) exist and the continuance of such license(s) would be contrary to public welfare and morals, as set forth in Article XX, Section 22, State Constitution, and Section(s) 24200 (a)&(b) of the Business and Professions Code;

WHEREFORE, I recommend that a hearing be held on this accusation.

Dated this 10<sup>TH</sup> day of August 2005



District Administrator

Department of Alcoholic Beverage Control

Reviewed:

#### STATEMENT TO RESPONDENT(S)

Unless a written request for a hearing, signed by you, or on your behalf, is delivered, or mailed, to the Department of Alcoholic Beverage Control within fifteen (15) days after the foregoing accusation was personally served on you or mailed to you, the Department of Alcoholic Beverage Control may proceed upon the accusation without a hearing to take action thereon as provided by law. The request for a hearing may be made by delivering or mailing the enclosed form entitled: "Notice of Defense", or by delivering or mailing a Notice of Defense to the Department of Alcoholic Beverage Control, 3927 Lennane Drive, Suite 100, Sacramento, California 95834, as provided by Section 11506 of the Government Code. The "Notice of Defense" forwarded herewith, if signed and returned to the Department of Alcoholic Beverage Control, shall be deemed a specific denial of all parts of the accusation, but you will not be permitted to raise any objection to the form of the accusation, unless you file a further Notice of Defense as provided, in Section 11506 of the Government Code within said 15 days after service of said accusation upon you. At any or all stages of these proceedings, you have the right to be represented by counsel at your own expense or to represent yourself without legal counsel. You are not entitled to the appointment of an attorney to represent you.

The hearing may be postponed for good cause. If you have good cause, you are obliged to notify this agency within 10 working days after you discover the good cause. Failure to notify this agency within 10 days will deprive you of a postponement.

ABC-300 (11-94)

# TULARE COUNTY SHERIFF'S DEPARTMENT

[X] CRIME REPORT

[ ] INCIDENT REPORT

[ ] WARRANT

SEP 21 2005

CASE NUMBER 05-12421

STATISTICAL CATEGORY  
☒ AG CRIME   ☐ NARCOTICS   ☐ GANG   ☐ HATE CRIME   ☐ DOMESTIC   ☐ JUVENILE   ☐ CORRECTIONS

SECTION  
 PC 211, PC 215      DEFINITION  
 ROBBERY / CAR JACKING

LOCATION OF OCCURENCE  
 801 S. MIRAGE, LINDSAY      BEAT  
 20 ADAM

DATE OCC. FROM TO: 7-31-05      TIME OCC. FROM TO: 0100-0130      DAY OCC. SUNDAY      DATE / TIME DISP 7-31-05 / 0129      TIME ARR 0135      TIME COMP 0259

VICTIM  
 CODE 04      NAME (LAST, FIRST MIDDLE) [REDACTED]      FIRM IF BUSINESS [REDACTED]      DATE OF BIRTH [REDACTED]      SEX M      RACE H

RESIDENCE ADDRESS [REDACTED]      OCCUPATION/BUS ADDRESS [REDACTED]      RESIDENCE PHONE [REDACTED]

CODE N/A      NAME (LAST, FIRST MIDDLE) [REDACTED]      FIRM IF BUSINESS [REDACTED]      DATE OF BIRTH [REDACTED]      SEX [REDACTED]      RACE [REDACTED]

RESIDENCE ADDRESS [REDACTED]      OCCUPATION/BUS ADDRESS [REDACTED]      RESIDENCE PHONE [REDACTED]

SUSPECT  
 CODE S-1      NAME (LAST, FIRST MIDDLE) UNKNOWN      AKA'S [REDACTED]      SEX [REDACTED]      RACE [REDACTED]

HGT. [REDACTED]      WGT. [REDACTED]      EYES [REDACTED]      HAIR [REDACTED]      HAIR STYLE [REDACTED]      DATE OF BIRTH [REDACTED]      DL / SS NUMBER [REDACTED]      ARR / CITE [REDACTED]

ADDRESS / POSSIBLE LOCATION [REDACTED]      RESIDENCE PHONE [REDACTED]

CODE [REDACTED]      NAME (LAST, FIRST MIDDLE) [REDACTED]      AKA'S [REDACTED]      SEX [REDACTED]      RACE [REDACTED]

HGT. [REDACTED]      WGT. [REDACTED]      EYES [REDACTED]      HAIR [REDACTED]      HAIR STYLE [REDACTED]      DATE OF BIRTH [REDACTED]      DL / SS NUMBER [REDACTED]      ARR / CITE [REDACTED]

ADDRESS / POSSIBLE LOCATION [REDACTED]      RESIDENCE PHONE [REDACTED]

VEHICLE  
 VIC [X]      SUS. [ ]      YEAR 92      MAKE FORD      MODEL PARN      COLOR GREEN      STYLE 4 DOOR      LICENSE [REDACTED]      STATE [REDACTED]

NAME OF R/O VIO-SUS      ADDRESS OF R/O VIO-SUS

OTHER VEHICLE INFORMATION N/A

ODOR OF ALCOHOL YES NO      ABLE TO CARE FOR SELF YES NO      SPEECH [ ] NORMAL [X] SLURRED [ ] INCOHERENT      CLOTHING [ ] NORMAL [X] SOILED [ ] DISARRANGED      BALANCE [ ] GOOD [ ] POOR [ ] UNSTEADY      ATTITUDE [X] COOPERATIVE [ ] ANTAGONISTIC [ ] ANGRY

NARRATIVE  
 SEE NARRATIVE:

TIME OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☐ NO

USE STATUS [X] ACTIVE      [ ] INACTIVE      [ ] CLOSED      [ ] UNFOUNDED

WS REL [X] N      COPIES TO: DET      PAT      D/A      JUV      CPS      OTHER      NON-PROS Y-N

REPORTING OFFICER [Signature]      I.D. # 63701      DATE/TIME 7-31-05      REVIEWED BY: [Signature]      SUP-RESP [X] N      LAB-RESP [X] N      DET-RESP [X] N      DATE

|  |  |   |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| PHYSICAL EVIDENCE<br>[YES] [NO]  |  | EVIDENCE FORM ATTACHED?<br>[YES] [NO]   |  | ENGLISH SPEAKING<br>[YES] [NO]   |  | NAME OF INTERPRETER  |  |
| PHOTOGRAPHS?<br>[YES] [NO]   |  | HOW MANY?<br>B/W. COLOR   |  | SHOE TRACKSTYLES [YES] [NO]<br>TIRE TRACKS? [YES] [NO]   |  | LATENT FINGERPRINTS? [YES] [NO]<br>SUBMITTED TO CAL ID? [YES] [NO]   |  |
| LOCATION OF OCCURRENCE   |  | 60. RESIDENCE   |  | 61. BUSINESS   |  | 62. PUBLIC PREMISES  |  |
| A 0 APARTMENT<br>B 0 CONDOMINIUM<br>C 0 DUP/TRI/FOURPLEX<br>D 0 GARAGE ATTACHED<br>E 0 GARAGE DETACHED<br>F 0 HOTEL/MOTEL ROOM(S)<br>G 0 SINGLE STORY HOUSE<br>H 0 MULTI-STORY HOUSE<br>I 0 MOBILE HOME<br>J 0 OTHER:  |  | A 0 APPLIANCE STORE<br>B 0 BANK/SAVINGS & LOAN<br>C 0 BAR<br>D 0 CAR/MOTORCYCLE SALES<br>E 0 COIN-OP MACHINE<br>F 0 CONSTRUCTION SITE<br>G 0 CONVENIENCE STORE<br>H 0 GAS STATION/GARAGE<br>I 0 GIFT/CANDY STORE<br>L 0 FENCED STORAGE  |  | S 0 MANUFACTURING CO<br>T 0 MEDICAL OFFICE<br>U 0 MOTEL/HOTEL<br>V 0 OFFICE BUILDING<br>W 0 PAWNSHOP/SECONDHAND<br>X 0 RESTAURANT/FASTFOOD<br>Y 0 SPORTING GOODS/GUNS<br>Z 0 SUPERMARKET<br>BB 0 WAREHOUSE<br>CC 0 OTHER<br>Q 0 LAUNDROMAT/CLEANERS<br>R 0 LIQUOR STORE            |  | A 0 CHURCH<br>B 0 HOSPITAL<br>C 0 PARK/PLAYGROUND<br>D 0 PARKING LOT (COUNTY)<br>E 0 PARKING LOT (OTHER)<br>F 0 PUBLIC BUILDING<br>G 0 SCHOOL<br>H 0 SHOPPING MALL<br>I 0 STREET/HIGHWAY/ALLEY<br>J 0 OTHER  |  |
| 63. OTHER  |  | 64. POINT OF ENTRY  |  | 65. METHOD OF ENTRY  |  | 66. OBJECT OF ATTACK   |  |
| A 0 VEHICLE<br>B 0 CARPORT<br>C 0 OPEN SPACE<br>D 0 LOT/YARD<br>E 0 GROVE/ORCHARD/MINE ET.<br>F 0 STORAGE BUILDING<br>G 0 UNKNOWN<br>H 0 OTHER   |  | A 0 UNKNOWN<br>B 0 FRONT<br>C 0 REAR<br>D 0 SIDE<br>E 0 GROUND LEVEL<br>F 0 UPPER LEVEL<br>G 0 DOOR<br>H 0 WINDOW<br>I 0 SLIDING GLASS<br>J 0 DUCT/VENT<br>K 0 ADJ. BLDG<br>L 0 ROOF/FLOOR<br>M 0 WALL<br>N 0 GARAGE<br>O 0 BASEMENT<br>P 0 TRUNK/ENGINE<br>Q 0 OTHER:  |  | A 0 ATTEMPT ONLY<br>B 0 NO FORCE<br>C 0 KEY SUP<br>D 0 BODY FORCE<br>E 0 SAW/DRILL<br>F 0 HID IN BLDG<br>G 0 PLIERS<br>H 0 PIPE WRENCH<br>I 0 TIRE IRON<br>J 0 UNK. PRY TOOL<br>K 0 BOLT CUTTERS<br>L 0 PUNCH<br>M 0 WINDOW SMASH<br>N 0 DOOR KICK<br>O 0 SCREWDRIVER<br>P 0 OTHER |  | A 0 CASH/REG/DRAWR<br>B 0 VICTIM/OWNER/EMPLOYEE<br>C 0 SAFE BOX<br>D 0 VENDING MACHINE<br>E 0 DISPLAY ITEMS<br>F 0 ATTIC<br>G 0 BEDROOM(S)<br>H 0 BATHROOM(S)<br>I 0 FAMILY ROOM/DEN<br>J 0 GARAGE/CARPORT<br>K 0 KITCHEN<br>L 0 LIVING ROOM<br>M 0 STORAGE AREA<br>N 0 PURSE/WALLET<br>O 0 CASH<br>P 0 OTHER:<br>VIC. VEHICLE |  |
| 67. HOW ATTACKED PERSON  |  | 68. HOW ATTACKED PROPERTY   |  | 69. PROPERTY ATTACKED  |  | 70. METHOD OF DEPARTURE  |  |
| A 0 INFLECTS INJURY<br>B 0 FORCED VICTIM<br>C 0 THREAT OF RETAL<br>D 0 BOUND VICTIM<br>E 0 RIP/CUT CLOTHING<br>F 0 MOLESTED VICTIM<br>G 0 STRUCK VICTIM<br>H 0 DISROBED PARTIALLY<br>I 0 DISROBED FULLY<br>J 0 BUNDFOLDED VICTIM<br>K 0 MADE THREATS<br>L 0 FIRED WEAPON<br>M 0 SNATCHED PURSE<br>N 0 DEMANDED MONEY<br>O 0 PROPERTY<br>P 0 OTHER: |  | A 0 VANDALIZED<br>B 0 RANSACKED<br>C 0 MATCHES FOR LIGHT<br>D 0 ALARM DISABLED<br>E 0 KNEW LOCATION VALUABLE<br>F 0 SELECTIVE IN LOOT<br>G 0 VEHICLE NEEDED<br>H 0 UNOCCUPIED BLDG.<br>I 0 OCCUPIED BLDG.<br>J 0 PREPARES EXIT<br>K 0 USED LOOKOUT<br>L 0 SUSPECT ARMED<br>M 0 SHUT OFF POWER<br>N 0 STASHED LOOT<br>O 0 OTHER: |  | A 0 CURRENCY, NOTES, ETC.<br>B 0 JEWELRY, PRECIOUS METAL<br>C 0 CLOTHING & FURS<br>D 0 OFFICE EQUIPMENT<br>E 0 TELEVISION, RADIOS, VCR, STEREO, ETC<br>F 0 FIREARMS<br>G 0 HOUSEHOLD GOODS, APPLIANCES, ETC.<br>H 0 CONSUMABLE GOODS<br>I 0 LIVESTOCK<br>J 0 OTHER:<br>JEWELRY     |  | A 0 VICTIM'S VEHICLE<br>B 0 AWAITING VEHICLE<br>C 0 NO PLATE ON VEHICLE<br>D 0 VEHICLE KNOWN<br>E 0 BICYCLE<br>F 0 MOTORCYCLE<br>G 0 MOPED<br>H 0 FOOT<br>I 0 UNKNOWN<br>J 0 OTHER:  |  |
| 71. WEAPON USED  |  | 72. USE OF WEAPON   |  | 73. SHOES  |  | 74. PANTS  |  |
| A 0 HANDGUN<br>B 0 REVOLVER<br>C 0 SEMI-AUTO<br>D 0 BLUE<br>E 0 S/STEEL<br>F 0 NICKEL<br>G 0 1-2 1/2 INCHES<br>H 0 2 1/2 INCHES<br>I 0 4 INCHES<br>J 0 LONGER THAN 6 INCHES<br>K 0 38<br>L 0 45<br>M 0 OTHER   |  | A 0 LONG GUN<br>B 0 RIFLE<br>C 0 ASSAULT RIFLE<br>D 0 SHOTGUN<br>E 0 OTHER<br>F 0 HANDS/FEET<br>G 0 POCKET KNIFE<br>H 0 HUNTING KNIFE<br>I 0 BUTCHER KNIFE<br>J 0 TOY GUN<br>K 0 SIMULATED WEAPON<br>L 0 OTHER  |  | A 0 SHOTS WEAPON<br>B 0 FIRES AT VICTIM<br>C 0 WARNING SHOT<br>D 0 BRANDISHES WEAPON<br>E 0 STABS/CUTS VICTIM<br>F 0 BLUDGEONS<br>G 0 STRANGLES VICTIM<br>H 0 OTHER  |  | A 0 LIGHT<br>B 0 DARK<br>C 0 DRESS<br>D 0 TENNIS<br>E 0 WORK BOOT<br>F 0 COWBOY<br>G 0 "COASTER"<br>H 0 OTHER  |  |
| 75. CAN VICTIM I.D. SUSPECT<br>[YES] [NO]  |  | 76. VICTIM/SUSPECT RELATIONSHIP   |  | 77. PHYS. CONDITION  |  | 78. APPEARANCE   |  |
| A 0 RELATIVE<br>B 0 SPOUSE<br>C 0 FRIEND<br>D 0 COLLEAGUE<br>E 0 CUSTOMER<br>F 0 NEIGHBOR<br>G 0 UNKNOWN   |  | A 0 ACNE<br>B 0 DARK<br>C 0 FRECKLED<br>D 0 FAIR<br>E 0 MEDIUM<br>F 0 OLIVE<br>G 0 ACNE SCARS<br>H 0 RUDDY<br>I 0 TAN<br>J 0 FACIAL SCARS<br>K 0 FACIAL TATTOOS<br>L 0 TATTOOS/HAND<br>M 0 TATTOOS/F. ARMS<br>N 0 TATTOOS/SHLDR<br>O 0 TATTOOS/BICEPS<br>P 0 TATTOOS/CHEST<br>Q 0 OTHER   |  | A 0 DIRTY<br>B 0 FLASHY<br>C 0 ATTRACTIVE<br>D 0 MILITARY<br>E 0 UNKEMPT<br>F 0 OOROUS<br>G 0 NEAT<br>H 0 CASUAL<br>I 0 GROOMED<br>J 0 OTHER   |  | A 0 LOUD<br>B 0 SOFT<br>C 0 MEDIUM<br>D 0 MONOTONE<br>E 0 HIGH PITCH<br>F 0 LOW PITCH<br>G 0 NASAL<br>H 0 ACCENT<br>I 0 HSP<br>J 0 STUTTER<br>K 0 RASPY<br>L 0 OFFENSIVE<br>M 0 NON-ENGUSH<br>N 0 PLEASANT<br>O 0 QUIET<br>P 0 MUMBLE<br>Q 0 TALKATIVE<br>R 0 DISGUISED<br>S 0 RAPID<br>T 0 SLOW<br>U 0 SLURRED                |  |
| 79. MASK   |  | 80. GLASSES   |  | 81. HAT  |  | 82. SHIRT  |  |
| A 0 SKI MASK<br>B 0 HOSIERY<br>C 0 HALLOWEEN<br>D 0 OTHER  |  | A 0 SUNGLASSES<br>B 0 WIRE FRAME<br>C 0 PLASTIC<br>D 0 MIRROR   |  | A 0 BASEBALL<br>B 0 KNIT<br>C 0 COWBOY<br>D 0 DRESS<br>E 0 OTHER   |  | A 0 LIGHT<br>B 0 DARK<br>C 0 DRESS<br>D 0 T-SHIRT<br>E 0 OTHER   |  |
| 83. DEMEANOR   |  | 84. FACIAL HAIR   |  | 85. BUILD  |  | 86. HAND USE   |  |
| A 0 ANGRY<br>B 0 CALM<br>C 0 NERVOUS<br>D 0 IRRATIONAL<br>E 0 EXPERT<br>F 0 VIOLENT<br>G 0 REGRETFUL<br>H 0 POLITE<br>I 0 DRUNK<br>J 0 STUPOROUS<br>K 0 UNKNOWN<br>L 0 OTHER   |  | A 0 CLEAN<br>B 0 MUSTACHE<br>C 0 FU MANCHU<br>D 0 GOATEE<br>E 0 UNSHAVEN<br>F 0 BEARD NEAT<br>G 0 BEARD WILD<br>H 0 SIDE BURN<br>I 0 LOWER UP<br>J 0 UNKNOWN  |  | A 0 TALL<br>B 0 SHORT<br>C 0 THIN<br>D 0 HEAVY SET<br>E 0 UNKNOWN  |  | A 0 UNKNOWN<br>B 0 RIGHT<br>C 0 LEFT   |  |

THIS SPACE TO EXPLAIN ANY OF THE ABOVE)

Paid  
Ck # \_\_\_\_\_ Amt \$ \_\_\_\_\_

# TULARE COUNTY SHERIFF'S DEPARTMENT

[X] CRIME REPORT [ ] INCIDENT REPORT [ ] WARRANT SEP 21 2005 CASE NUMBER 04-18021

STATISTICAL CATEGORY  
☐ AG CRIME ☐ NARCOTICS ☐ GANG ☐ HATE CRIME ☐ DOMESTIC ☐ **Grand Fields** ☐ CORRECTIONS  
 Tulare County Tax Collector

SECTION **P.C. 245** DEFINITION **ASSAULT WITH DEADLY WEAPON** By **S** Deputy **FELONY/MISD** TYPE **4200**

LOCATION OF OCCURRENCE **EL CAPAJINO BAR** BEAT **20A** PROPERTY LOSS & PROPERTY DAMAGE

DATE OCC. FROM TO: **11-13-04** TIME OCC. FROM TO: **2310 HRS** DAY OCC. **SAT.** DATE / TIME DISP **11-13-04 2325** TIME ARR **2335** TIME COMP **2355**

VICTIM CODE **U-1** NAME (LAST, FIRST MIDDLE) **[REDACTED]** FIRM IF BUSINESS DATE OF BIRTH **[REDACTED]** SEX **M** RACE **14**

RESIDENCE ADDRESS **[REDACTED]** OCCUPATION/BUS ADDRESS **[REDACTED]** RESIDENCE PHONE **[REDACTED]**

CODE NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS DATE OF BIRTH SEX RACE

RESIDENCE ADDRESS OCCUPATION/BUS ADDRESS RESIDENCE PHONE

SUSPECT CODE **S-1** NAME (LAST, FIRST MIDDLE) **UNKNOWN** AKA'S **[REDACTED]** SEX **M** RACE **14**

HGT. WGT. EYES HAIR HAIR STYLE DATE OF BIRTH DL / SS NUMBER **UNKNOWN** ARR / CITE

ADDRESS / POSSIBLE LOCATION **UNKNOWN** RESIDENCE PHONE **UNKNOWN**

CODE NAME (LAST, FIRST MIDDLE) AKA'S SEX RACE

HGT. WGT. EYES HAIR HAIR STYLE DATE OF BIRTH DL / SS NUMBER ARR / CITE

ADDRESS / POSSIBLE LOCATION RESIDENCE PHONE

VEHICLE VIC [ ] SUS. [ ] YEAR MAKE MODEL COLOR STYLE LICENSE STATE

NAME OF R / O VIC - SUS ADDRESS OF R / O VIC - SUS

OTHER VEHICLE INFORMATION

ODOR OF ALCOHOL YES NO ABLE TO CARE FOR SELF YES NO SPEECH [ ] NORMAL [ ] SLURRED [ ] INCOHERENT CLOTHING [ ] NORMAL [ ] SOILED [ ] DISARRANGED BALANCE [ ] GOOD [ ] POOR [ ] UNSTEADY ATTITUDE [ ] COOPERATIVE [ ] ANTAGONISTIC [ ] ANGRY

NARRATIVE

- REFER TO NARRATIVE -

VICTIM OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☐ NO

CASE STATUS [ ] ACTIVE ☒ INACTIVE [ ] CLOSED [ ] UNFOUNDED NON-PROS ☒ N

NEWS REL ☒ N COPIES TO: DET PAT D/A JUV CPS OTHER SUP-RESP ☒ N LAB-RESP ☒ Y DET-RESP ☒ Y

REPORTING OFFICER **P. HERRERA** I.D. # **H9062** DATE/TIME **11-13-04/2325** REVIEWED BY: **[Signature]** DATE **11-14-04**

SD 1 (REV 3/99)



|  |  |  |  |   |   |  |  |   |  |
|--|--|--|--|---|---|--|--|---|--|
| PHYSICAL EVIDENCE<br>[YES] [NO]  |  | EVIDENCE FORM ATTACHED ?<br>[YES] [NO]   |  | ENGLISH SPEAKING<br>[YES] [NO]  |   | NAME OF INTERPRETER  |  |   |  |
| PHOTOGRAPHS?<br>[YES] [NO]   |  | HOW MANY?<br>B/W COLOR   |  | SHOE TRACKSTYLES [YES] [NO]<br>TIRE TRACKS? [YES] [NO]  |   | LATENT FINGERPRINTS? [YES] [NO]<br>SUBMITTED TO CAL ID.? [YES] [NO]  |  |   |  |
| LOCATION OF OCCURRENCE   | 60. RESIDENCE<br>A <input type="checkbox"/> APARTMENT<br>B <input type="checkbox"/> CONDOMINIUM<br>C <input type="checkbox"/> DUP/TRI/FOURPLEX<br>D <input type="checkbox"/> GARAGE ATTACHED<br>E <input type="checkbox"/> GARAGE DETACHED<br>F <input type="checkbox"/> HOTEL/MOTEL ROOM(S)<br>G <input type="checkbox"/> SINGLE STORY HOUSE<br>H <input type="checkbox"/> MULTI-STORY HOUSE<br>I <input type="checkbox"/> MOBILE HOME<br>J <input type="checkbox"/> OTHER:   |  | 61. BUSINESS<br>A <input type="checkbox"/> APPLIANCE STORE<br>B <input type="checkbox"/> BANK/SAVINGS & LOAN<br>C <input type="checkbox"/> BAR<br>D <input type="checkbox"/> CAR/MOTORCYCLE SALES<br>E <input type="checkbox"/> COIN-OP MACHINE<br>F <input type="checkbox"/> CONSTRUCTION SITE<br>G <input type="checkbox"/> CONVENIENCE STORE<br>H <input type="checkbox"/> GAS STATION/GARAGE<br>I <input type="checkbox"/> GIFT/CANDY STORE<br>J <input type="checkbox"/> FENCED STORAGE   |   | S <input type="checkbox"/> MANUFACTURING CO<br>T <input type="checkbox"/> MEDICAL OFFICE<br>U <input type="checkbox"/> MOTEL/HOTEL<br>V <input type="checkbox"/> OFFICE BUILDING<br>W <input type="checkbox"/> PAWN SHOP/SECONDHAND<br>X <input type="checkbox"/> RESTAURANT/FASTFOOD<br>Y <input type="checkbox"/> SPORTING GOODS/GUNS<br>Z <input type="checkbox"/> SUPERMARKET<br>BB <input type="checkbox"/> WAREHOUSE<br>CC <input type="checkbox"/> OTHER<br>Q <input type="checkbox"/> LAUNDROMAT/CLEANERS<br>R <input type="checkbox"/> LIQUOR STORE  |  | 62. PUBLIC PREMISES<br>A <input type="checkbox"/> CHURCH<br>B <input type="checkbox"/> HOSPITAL<br>C <input type="checkbox"/> PARK/PLAYGROUND<br>D <input type="checkbox"/> PARKING LOT (COUNTY)<br>E <input type="checkbox"/> PARKING LOT (OTHER)<br>F <input type="checkbox"/> PUBLIC BUILDING<br>G <input type="checkbox"/> SCHOOL<br>H <input type="checkbox"/> SHOPPING MALL<br>I <input type="checkbox"/> STREET/HIGHWAY/ALLEY<br>J <input type="checkbox"/> OTHER   |   |  |
|  | 63. OTHER<br>A <input type="checkbox"/> VEHICLE<br>B <input type="checkbox"/> CARPORT<br>C <input type="checkbox"/> OPEN SPACE<br>D <input type="checkbox"/> LOT/YARD<br>E <input type="checkbox"/> GROVE/ORCHARD/VINE ETC.<br>F <input type="checkbox"/> STORAGE BUILDING<br>G <input type="checkbox"/> UNKNOWN<br>H <input type="checkbox"/> OTHER   |  |  |   |   |  |  |   |  |
| MODUS OPERANDI<br>□ ADDITIONAL INFORMATION IN NARRATIVE  | 64. POINT OF ENTRY<br>A <input type="checkbox"/> UNKNOWN<br>B <input type="checkbox"/> FRONT<br>C <input type="checkbox"/> REAR<br>D <input type="checkbox"/> SIDE<br>E <input type="checkbox"/> GROUND LEVEL<br>F <input type="checkbox"/> UPPER LEVEL<br>G <input type="checkbox"/> DOOR<br>H <input type="checkbox"/> WINDOW<br>I <input type="checkbox"/> SLIDING GLASS<br>J <input type="checkbox"/> DUCT/VENT<br>K <input type="checkbox"/> ADJ. BLDG<br>L <input type="checkbox"/> ROOF/FLOOR<br>M <input type="checkbox"/> WALL<br>N <input type="checkbox"/> GARAGE<br>O <input type="checkbox"/> BASEMENT<br>P <input type="checkbox"/> TRUNK/ENGINE<br>Q <input type="checkbox"/> OTHER:                    |  | 65. METHOD OF ENTRY<br>A <input type="checkbox"/> ATTEMPT ONLY<br>B <input type="checkbox"/> NO FORCE<br>C <input type="checkbox"/> KEY SUP<br>D <input type="checkbox"/> BOOILY FORCE<br>E <input type="checkbox"/> SAW/DRILL<br>F <input type="checkbox"/> HID IN BLDG.<br>G <input type="checkbox"/> PLIERS<br>H <input type="checkbox"/> PIPE WRENCH<br>I <input type="checkbox"/> TIRE IRON<br>J <input type="checkbox"/> UNK. PRY TOOL<br>K <input type="checkbox"/> BOLT CUTTERS<br>L <input type="checkbox"/> PUNCH<br>M <input type="checkbox"/> WINDOW SMASH<br>N <input type="checkbox"/> DOOR KICK<br>O <input type="checkbox"/> SCREWDRIVER<br>P <input type="checkbox"/> OTHER |   | 66. OBJECT OF ATTACK<br>A <input type="checkbox"/> CASH REG./DRAWN<br>B <input type="checkbox"/> VICTIM/OWNER/EMPLOYEE<br>C <input type="checkbox"/> SAFE BOX<br>D <input type="checkbox"/> VENDING MACHINE<br>E <input type="checkbox"/> DISPLAY ITEMS<br>F <input type="checkbox"/> ATTIC<br>G <input type="checkbox"/> BEDROOM(S)<br>H <input type="checkbox"/> BATHROOM(S)<br>I <input type="checkbox"/> FAMILY ROOM/DEN<br>J <input type="checkbox"/> GARAGE/CARPORT<br>K <input type="checkbox"/> KITCHEN<br>L <input type="checkbox"/> LIVING ROOM<br>M <input type="checkbox"/> STORAGE AREA<br>N <input type="checkbox"/> PURSE/WALLET<br>O <input type="checkbox"/> CASH<br>P <input type="checkbox"/> OTHER: |  | 67. HOW ATTACKED PERSON<br>A <input type="checkbox"/> INFLECTS INJURY<br>B <input type="checkbox"/> FORCED VICTIM<br>C <input type="checkbox"/> THREAT OF RETAL<br>D <input type="checkbox"/> BOUND VICTIM<br>E <input type="checkbox"/> RIP/CUT CLOTHING<br>F <input type="checkbox"/> MOLESTED VICTIM<br>G <input type="checkbox"/> STRUCK VICTIM<br>H <input type="checkbox"/> DISROBED PARTIALLY<br>I <input type="checkbox"/> DISROBED FULLY<br>J <input type="checkbox"/> BLINDFOLDED VICTIM<br>K <input type="checkbox"/> MADE THREATS<br>L <input type="checkbox"/> FIRED WEAPON<br>M <input type="checkbox"/> SNATCHED PURSE<br>N <input type="checkbox"/> DEMANDED MONEY<br>O <input type="checkbox"/> PROPERTY<br>P <input type="checkbox"/> OTHER: |   |  |
|  | 68. HOW ATTACKED PROPERTY<br>A <input type="checkbox"/> VANDALIZED<br>B <input type="checkbox"/> RANSACKED<br>C <input type="checkbox"/> MATCHES FOR LIGHT<br>D <input type="checkbox"/> ALARM DISABLED<br>E <input type="checkbox"/> KNEW LOCATION VALUABLES<br>F <input type="checkbox"/> SELECTIVE IN LOOT<br>G <input type="checkbox"/> VEHICLE NEEDED<br>H <input type="checkbox"/> UNOCCUPIED BLDG.<br>I <input type="checkbox"/> OCCUPIED BLDG.<br>J <input type="checkbox"/> PREPARES EXIT<br>K <input type="checkbox"/> USED LOOKOUT<br>L <input type="checkbox"/> SUSPECT ARMED<br>M <input type="checkbox"/> SHUT OFF POWER<br>N <input type="checkbox"/> STASHED LOOT<br>O <input type="checkbox"/> OTHER: |  |  |   |   |  |  |   |  |
| VICTIM/WITNESS INFORMATION<br>□ ADDITIONAL NAMES IN NARRATIVE  | 69. PROPERTY ATTACKED<br>A <input type="checkbox"/> CURRENCY, NOTES, ETC.<br>B <input type="checkbox"/> JEWELRY, PRECIOUS METAL<br>C <input type="checkbox"/> CLOTHING & FURS<br>D <input type="checkbox"/> OFFICE EQUIPMENT<br>E <input type="checkbox"/> TELEVISION, RADIOS, VCR, STEREO, ETC<br>F <input type="checkbox"/> FIREARMS<br>G <input type="checkbox"/> HOUSEHOLD GOODS, APPLIANCES, ETC.<br>H <input type="checkbox"/> CONSUMABLE GOODS<br>I <input type="checkbox"/> LIVESTOCK<br>J <input type="checkbox"/> OTHER:   |  | 70. METHOD OF DEPARTURE<br>A <input type="checkbox"/> VICTIM'S VEHICLE<br>B <input type="checkbox"/> AWAITING VEHICLE<br>C <input type="checkbox"/> NO PLATE ON VEHICLE<br>D <input type="checkbox"/> VEHICLE KNOWN<br>E <input type="checkbox"/> BICYCLE<br>F <input type="checkbox"/> MOTORCYCLE<br>G <input type="checkbox"/> MOPED<br>H <input type="checkbox"/> FOOT<br>I <input type="checkbox"/> UNKNOWN<br>J <input type="checkbox"/> OTHER:   |   | 71. WEAPON USED<br>A <input type="checkbox"/> HANDGUN<br>B <input type="checkbox"/> REVOLVER<br>C <input type="checkbox"/> SEMI-AUTO<br>D <input type="checkbox"/> BLUE<br>E <input type="checkbox"/> S/STEEL<br>F <input type="checkbox"/> NICKEL<br>G <input type="checkbox"/> 1 - 2 1/2 INCHES<br>H <input type="checkbox"/> 2 1/2 - 4 INCHES<br>I <input type="checkbox"/> 4 - 8 INCHES<br>J <input type="checkbox"/> LONGER THAN 8 INCHES<br>K <input type="checkbox"/> 38<br>L <input type="checkbox"/> 45<br>M <input type="checkbox"/> OTHER  |  | B <input type="checkbox"/> LONG GUN<br>C <input type="checkbox"/> RIFLE<br>D <input type="checkbox"/> ASSAULT RIFLE<br>E <input type="checkbox"/> SHOTGUN<br>F <input type="checkbox"/> OTHER<br>G <input type="checkbox"/> HANDS/FEET<br>H <input type="checkbox"/> POCKET KNIFE<br>I <input type="checkbox"/> HUNTING KNIFE<br>J <input type="checkbox"/> BUTCHER KNIFE<br>K <input type="checkbox"/> TOY GUN<br>L <input type="checkbox"/> SIMULATED WEAPON<br>M <input type="checkbox"/> OTHER   |   |  |
|  | 72. USE OF WEAPON<br>A <input type="checkbox"/> SHOTS WEAPON<br>B <input type="checkbox"/> FIRES AT VICTIM<br>C <input type="checkbox"/> WARNING SHOT<br>D <input type="checkbox"/> BRANDISHES WEAPON<br>E <input type="checkbox"/> STABS/CUTS VICTIM<br>F <input type="checkbox"/> BLUDGEONS<br>G <input type="checkbox"/> STRANGLES VICTIM<br>H <input type="checkbox"/> OTHER:  |  |  |   |   |  |  |   |  |
| 104. CAN VICTIM I.D. SUSPECT<br>[YES] [NO]   |  | 109. PHYS. CONDITION<br>SUSPECT<br>1<br>A <input type="checkbox"/> ACNE<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> FRECKLED<br>D <input type="checkbox"/> FAIR<br>E <input type="checkbox"/> MEDIUM<br>F <input type="checkbox"/> OLIVE<br>G <input type="checkbox"/> ACNE SCARS<br>H <input type="checkbox"/> RUDDY<br>I <input type="checkbox"/> TAN<br>J <input type="checkbox"/> FACIAL SCARS<br>K <input type="checkbox"/> FACIAL TATTOOS<br>L <input type="checkbox"/> TATTOOS/HAND<br>M <input type="checkbox"/> TATTOOS/F. ARMS<br>N <input type="checkbox"/> TATTOOS/SHLDR<br>O <input type="checkbox"/> TATTOOS/BICEPS<br>P <input type="checkbox"/> TATTOOS/CHEST<br>Q <input type="checkbox"/> OTHER |  | 112. APPEARANCE<br>SUSPECT<br>1<br>A <input type="checkbox"/> DIRTY<br>B <input type="checkbox"/> FLASHY<br>C <input type="checkbox"/> ATTRACTIVE<br>D <input type="checkbox"/> MILITARY<br>E <input type="checkbox"/> UNKEMPT<br>F <input type="checkbox"/> ODOROUS<br>G <input type="checkbox"/> NEAT<br>H <input type="checkbox"/> CASUAL<br>I <input type="checkbox"/> GROOMED<br>J <input type="checkbox"/> OTHER                  |   | 108. SPEECH<br>SUSPECT<br>1<br>A <input type="checkbox"/> LOUD<br>B <input type="checkbox"/> SOFT<br>C <input type="checkbox"/> MEDIUM<br>D <input type="checkbox"/> MONOTONE<br>E <input type="checkbox"/> HIGH PITCH<br>F <input type="checkbox"/> LOW PITCH<br>G <input type="checkbox"/> NASAL<br>H <input type="checkbox"/> ACCENT<br>I <input type="checkbox"/> USP<br>J <input type="checkbox"/> STUTTER<br>K <input type="checkbox"/> RASPY<br>L <input type="checkbox"/> OFFENSIVE<br>M <input type="checkbox"/> NON-ENGLISH<br>N <input type="checkbox"/> PLEASANT<br>O <input type="checkbox"/> QUIET<br>P <input type="checkbox"/> MUMBLE<br>Q <input type="checkbox"/> TALKATIVE<br>R <input type="checkbox"/> DISGUISED<br>S <input type="checkbox"/> RAPID<br>T <input type="checkbox"/> SLOW<br>U <input type="checkbox"/> SLURRED |  | 115. PANTS<br>SUSPECT<br>1<br>A <input type="checkbox"/> LIGHT<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> DRESS<br>D <input type="checkbox"/> TENNIS<br>E <input type="checkbox"/> WORK BOOT<br>F <input type="checkbox"/> COWBOY<br>G <input type="checkbox"/> "COASTER"<br>H <input type="checkbox"/> OTHER |  |
| 103. VICTIM/SUSPECT RELATIONSHIP<br>1<br>A <input type="checkbox"/> RELATIVE<br>B <input type="checkbox"/> SPOUSE<br>C <input type="checkbox"/> FRIEND<br>D <input type="checkbox"/> COLLEAGUE<br>E <input type="checkbox"/> CUSTOMER<br>F <input type="checkbox"/> NEIGHBOR<br>G <input type="checkbox"/> UNKNOWN |  | 105. DEMEANOR<br>SUSPECT<br>1<br>A <input type="checkbox"/> ANGRY<br>B <input type="checkbox"/> CALM<br>C <input type="checkbox"/> NERVOUS<br>D <input type="checkbox"/> IRRATIONAL<br>E <input type="checkbox"/> EXPERT<br>F <input type="checkbox"/> VIOLENT<br>G <input type="checkbox"/> REGRETFUL<br>H <input type="checkbox"/> POLITE<br>I <input type="checkbox"/> DRUNK<br>J <input type="checkbox"/> STUPOROUS<br>K <input type="checkbox"/> OTHER  |  | 113. HAT<br>SUSPECT<br>1<br>A <input type="checkbox"/> BASEBALL<br>B <input type="checkbox"/> KNIT<br>C <input type="checkbox"/> COWBOY<br>D <input type="checkbox"/> DRESS<br>E <input type="checkbox"/> OTHER   |   | 114. SHIRT<br>SUSPECT<br>1<br>A <input type="checkbox"/> LIGHT<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> T-SHIRT<br>D <input type="checkbox"/> OTHER  |  | 117. TEETH<br>SUSPECT<br>1<br>A <input type="checkbox"/> CROOKED<br>B <input type="checkbox"/> BRACES<br>C <input type="checkbox"/> DECAYED<br>D <input type="checkbox"/> MISSING<br>E <input type="checkbox"/> GOLD CAPS   |  |
| 106. MASK<br>SUSPECT<br>1<br>A <input type="checkbox"/> SKI MASK<br>B <input type="checkbox"/> HOSIERY<br>C <input type="checkbox"/> HALLOWEEN<br>D <input type="checkbox"/> OTHER   |  |  |  | 111. FACIAL HAIR<br>SUSPECT<br>1<br>A <input type="checkbox"/> CLEAN<br>B <input type="checkbox"/> MUSTACHE<br>C <input type="checkbox"/> FU MANCHU<br>D <input type="checkbox"/> GOATEE<br>E <input type="checkbox"/> UNSHAVEN<br>F <input type="checkbox"/> BEARD NEAT<br>G <input type="checkbox"/> BEARD WILD<br>H <input type="checkbox"/> SIDE BURN<br>I <input type="checkbox"/> LOWER LIP<br>J <input type="checkbox"/> UNKNOWN |   | 118. HAND USE<br>SUSPECT<br>1<br>A <input type="checkbox"/> UNKNOWN<br>B <input type="checkbox"/> RIGHT<br>C <input type="checkbox"/> LEFT   |  | 110. BUILD<br>SUSPECT<br>1<br>A <input type="checkbox"/> TALL<br>B <input type="checkbox"/> SHORT<br>C <input type="checkbox"/> THIN<br>D <input type="checkbox"/> HEAVY SET<br>E <input type="checkbox"/> UNKNOWN  |  |
| (USE THIS SPACE TO EXPLAIN ANY OF THE ABOVE)   |  |  |  |   |   |  |  |   |  |
| REPORTING DEPUTY   |  |  |  | DATE / TIME   |   | REVIEWED BY:   |  |   |  |
|  |  |  |  |   |   | . DATE   |  |   |  |

# *Tulare County Sheriff's Department*

## **News Item**

*Crime:* P.C. 245

*Area:* Lindsay

*Date Rec'd* 11-13-04

*Offence:* Assault with a deadly weapon

*Case Number:* 04-18021

*Time Rec'd* 2325 hours

*Victim* [REDACTED] s

*Dob:* 02-25-72

*Date Occ'd* 11-13-04

*Address:* 19435 Rd 230, Strathmore, Ca.

*Time Occ'd* 2145 hours

*Crime Scene Location:* El Capasino Bar / 807 S. Mirage, Lindsay, Ca.

### **Narrative:**

The victim stated that he is employed as a security guard at this location. The victim stated that a male subject stabbed him in his right arm after being denied entry into the bar.

*PAYED on 11-14-04  
@ 0230 HRS [Signature]*

**REPORTING DEPUTY:**

P. Herrera H9062

**DATE/TIME:** 11-13-04 / 2325 Hours

**SUPERVISOR:**

[Signature]

BAR FILE - TULARE COUNTY SHERIFF'S OFFICE  
Name of Bar EL CAMPESINO BAR Address \_\_\_\_\_  
Date and Time 10-02-04 2235 Case No. 04-15685  
Incident: DANCERS / INFORMATION  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Deputy(s): CIDEAY D-0108

Ok # \_\_\_\_\_ Paid Amt \$ \_\_\_\_\_

SEP 21 2005

O Gerald Fields  
Tulare County Tax Collector  
By \_\_\_\_\_ Deputy

# TULARE COUNTY SHERIFF'S DEPARTMENT

☐ CRIME REPORT

☒ INCIDENT REPORT

☐ WARRANT

CASE NUMBER

04-15685

STATISTICAL CATEGORY

☐ AG CRIME ☐ NARCOTICS ☐ GANG ☐ HATE CRIME ☐ DOMESTIC ☐ JUVENILE ☐ CORRECTIONS

SECTION

DEFINITION

FELONY/MISD

TYPE

INFORMATION

AOA ABC

NIA

9320

LOCATION OF OCCURRENCE

LINDSAY

BEAT

20-A

PROPERTY LOSS & PROPERTY DAMAGE

NIA

DATE OCC.

FROM TO:

TIME OCC.

FROM TO:

DAY OCC.

DATE / TIME DISP

TIME ARR

TIME COMP

10-02-04

2245

SAT

10-02-04 2235

2245

2308

V  
I  
C  
T  
I  
M

CODE

NAME (LAST, FIRST MIDDLE)

FIRM IF BUSINESS

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

CODE

NAME (LAST, FIRST MIDDLE)

FIRM IF BUSINESS

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

S  
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C  
T

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

ADDRESS / POSSIBLE LOCATION

807 S. MIRAGE ST. LINDSAY

RESIDENCE PHONE

568 4781

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

ADDRESS / POSSIBLE LOCATION

RESIDENCE PHONE

V  
E  
H  
I  
C  
L  
E

VIC [ ]

SUS. [ ]

YEAR

MAKE

MODEL

COLOR

STYLE

LICENSE

STATE

NAME OF R / O

VIC - SUS

ADDRESS OF R / O

VIC - SUS

OTHER VEHICLE INFORMATION

ODOR OF ALCOHOL  
YES NO

ABLE TO CARE FOR SELF  
YES NO

SPEECH  
[ ] NORMAL  
[ ] SLURRED  
[ ] INCOHERENT

CLOTHING  
[ ] NORMAL  
[ ] SOILED  
[ ] DISARRANGED

BALANCE  
[ ] GOOD  
[ ] POOR  
[ ] UNSTEADY

ATTITUDE  
[ ] COOPERATIVE  
[ ] ANTAGONISTIC  
[ ] ANGRY

NARRATIVE

SEE NARRATIVE

ENTERED  
10/04/04  
QK

VICTIM OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☒ NO

CASE STATUS ☐ ACTIVE ☐ INACTIVE ☒ CLOSED ☐ UNFOUNDED

NON-PROS Y ☒ N

NEWS REL Y ☒ COPIES TO: DET PAT D/A JUV CPS OTHER

SUP-RESP Y ☒

LAB-RESP Y ☒

DET-RESP Y ☒

REPORTING OFFICER

I.D. #

DATE/TIME

REVIEWED BY

DATE

C. DEAN

D-0008

100304 0458

[Signature]

10304

|  |   |   |  |   |   |  |   |  |
|--|---|---|--|---|---|--|---|--|
| PHYSICAL EVIDENCE<br>[YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>   |   | EVIDENCE FORM ATTACHED?<br>[YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>  |  | ENGLISH SPEAKING<br>[YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>   |   | NAME OF INTERPRETER  |   |  |
| PHOTOGRAPHS?<br>[YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>  |   | HOW MANY?<br>B/W COLOR  |  | SHOE TRACKSTYLES [YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>  |   | LATENT FINGERPRINTS? [YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>   |   |  |
|  |   |   |  | TIRE TRACKS? [YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>  |   | SUBMITTED TO CAL ID.? [YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>  |   |  |
| LOCATION OF OCCURRENCE   | 60. RESIDENCE<br>A <input checked="" type="checkbox"/> APARTMENT<br>B <input checked="" type="checkbox"/> CONDOMINIUM<br>C <input checked="" type="checkbox"/> DUPLEX/FOURPLEX<br>D <input checked="" type="checkbox"/> GARAGE ATTACHED<br>E <input checked="" type="checkbox"/> GARAGE DETACHED<br>F <input checked="" type="checkbox"/> HOTEL/MOTEL ROOM(S)<br>G <input checked="" type="checkbox"/> SINGLE STORY HOUSE<br>H <input checked="" type="checkbox"/> MULTI-STORY HOUSE<br>I <input checked="" type="checkbox"/> MOBILE HOME<br>J <input checked="" type="checkbox"/> OTHER:   |   | 61. BUSINESS<br>A <input checked="" type="checkbox"/> APPLIANCE STORE<br>B <input checked="" type="checkbox"/> BANK/SAVINGS & LOAN<br>C <input checked="" type="checkbox"/> BAR<br>D <input checked="" type="checkbox"/> CAR/MOTORCYCLE SALES<br>E <input checked="" type="checkbox"/> COIN-OP MACHINE<br>F <input checked="" type="checkbox"/> CONSTRUCTION SITE<br>G <input checked="" type="checkbox"/> CONVENIENCE STORE<br>H <input checked="" type="checkbox"/> GAS STATION/GARAGE<br>I <input checked="" type="checkbox"/> GIFT/CANDY STORE<br>J <input checked="" type="checkbox"/> FENCED STORAGE   |   | S <input checked="" type="checkbox"/> MANUFACTURING CO<br>T <input checked="" type="checkbox"/> MEDICAL OFFICE<br>U <input checked="" type="checkbox"/> MOTEL/HOTEL<br>V <input checked="" type="checkbox"/> OFFICE BUILDING<br>W <input checked="" type="checkbox"/> PAINTSHOP/SECONDHAND<br>X <input checked="" type="checkbox"/> RESTAURANT/FASTFOOD<br>Y <input checked="" type="checkbox"/> SPORTING GOODS/GUNS<br>Z <input checked="" type="checkbox"/> SUPERMARKET<br>BB <input checked="" type="checkbox"/> WAREHOUSE<br>CC <input checked="" type="checkbox"/> OTHER<br>D <input checked="" type="checkbox"/> LAUNDROMAT/CLEANERS<br>R <input checked="" type="checkbox"/> LIQUOR STORE  |  | 62. PUBLIC PREMISES<br>A <input checked="" type="checkbox"/> CHURCH<br>B <input checked="" type="checkbox"/> HOSPITAL<br>C <input checked="" type="checkbox"/> PARK/PLAYGROUND<br>D <input checked="" type="checkbox"/> PARKING LOT (COUNTY)<br>E <input checked="" type="checkbox"/> PARKING LOT (OTHER)<br>F <input checked="" type="checkbox"/> PUBLIC BUILDING<br>G <input checked="" type="checkbox"/> SCHOOL<br>H <input checked="" type="checkbox"/> SHOPPING MALL<br>I <input checked="" type="checkbox"/> STREET/HIGHWAY/ALLEY<br>J <input checked="" type="checkbox"/> OTHER  |  |
|  | 63. OTHER<br>A <input checked="" type="checkbox"/> VEHICLE<br>B <input checked="" type="checkbox"/> AIRPORT<br>C <input checked="" type="checkbox"/> OPEN SPACE<br>D <input checked="" type="checkbox"/> LOT/YARD<br>E <input checked="" type="checkbox"/> GROVE/ORCHARD/MINE ETC.<br>F <input checked="" type="checkbox"/> STORAGE BUILDING<br>G <input checked="" type="checkbox"/> UNKNOWN<br>H <input checked="" type="checkbox"/> OTHER  |   |  |   |   |  |   |  |
| MODUS OPERANDI<br>□ ADDITIONAL INFORMATION IN NARRATIVE  | 64. POINT OF ENTRY<br>A <input checked="" type="checkbox"/> UNKNOWN<br>B <input checked="" type="checkbox"/> FRONT<br>C <input checked="" type="checkbox"/> REAR<br>D <input checked="" type="checkbox"/> SIDE<br>E <input checked="" type="checkbox"/> GROUND LEVEL<br>F <input checked="" type="checkbox"/> UPPER LEVEL<br>G <input checked="" type="checkbox"/> DOOR<br>H <input checked="" type="checkbox"/> WINDOW<br>I <input checked="" type="checkbox"/> SLIDING GLASS<br>J <input checked="" type="checkbox"/> DUCT/VENT<br>K <input checked="" type="checkbox"/> ADJ. BLDG.<br>L <input checked="" type="checkbox"/> ROOF/FLOOR<br>M <input checked="" type="checkbox"/> WALL<br>N <input checked="" type="checkbox"/> GARAGE<br>O <input checked="" type="checkbox"/> BASEMENT<br>P <input checked="" type="checkbox"/> TRUNK/ENGINE<br>Q <input checked="" type="checkbox"/> OTHER: |   | 65. METHOD OF ENTRY<br>A <input checked="" type="checkbox"/> ATTEMPT ONLY<br>B <input checked="" type="checkbox"/> NO FORCE<br>C <input checked="" type="checkbox"/> KEY SLIP<br>D <input checked="" type="checkbox"/> BODILY FORCE<br>E <input checked="" type="checkbox"/> SAWDRILL<br>F <input checked="" type="checkbox"/> HID IN BLDG.<br>G <input checked="" type="checkbox"/> PLIERS<br>H <input checked="" type="checkbox"/> PIPE WRENCH<br>I <input checked="" type="checkbox"/> TIRE IRON<br>J <input checked="" type="checkbox"/> UNK. PRY TOOL<br>K <input checked="" type="checkbox"/> BOLT CUTTERS<br>L <input checked="" type="checkbox"/> PUNCH<br>M <input checked="" type="checkbox"/> WINDOW SMASH<br>N <input checked="" type="checkbox"/> DOOR KICK<br>O <input checked="" type="checkbox"/> SCREWDRIVER<br>P <input checked="" type="checkbox"/> OTHER   |   | 66. OBJECT OF ATTACK<br>A <input checked="" type="checkbox"/> CASH/REG./DRAWR<br>B <input checked="" type="checkbox"/> VICTIM/OWNER/EMPLOYEE<br>C <input checked="" type="checkbox"/> SAFE BOX<br>D <input checked="" type="checkbox"/> VENDING MACHINE<br>E <input checked="" type="checkbox"/> DISPLAY ITEMS<br>F <input checked="" type="checkbox"/> ATTIC<br>G <input checked="" type="checkbox"/> BEDROOM(S)<br>H <input checked="" type="checkbox"/> BATHROOM(S)<br>I <input checked="" type="checkbox"/> FAMILY ROOM/DEN<br>J <input checked="" type="checkbox"/> GARAGE/CARPORT<br>K <input checked="" type="checkbox"/> KITCHEN<br>L <input checked="" type="checkbox"/> LIVING ROOM<br>M <input checked="" type="checkbox"/> STORAGE AREA<br>N <input checked="" type="checkbox"/> PURSE/WALLET<br>O <input checked="" type="checkbox"/> CASH<br>P <input checked="" type="checkbox"/> OTHER: |  | 67. HOW ATTACKED PERSON<br>A <input checked="" type="checkbox"/> INFLECTS INJURY<br>B <input checked="" type="checkbox"/> FORCED VICTIM<br>C <input checked="" type="checkbox"/> THREAT OF RETAL<br>D <input checked="" type="checkbox"/> BOUND VICTIM<br>E <input checked="" type="checkbox"/> RIP/CUT CLOTHING<br>F <input checked="" type="checkbox"/> MOLESTED VICTIM<br>G <input checked="" type="checkbox"/> STRUCK VICTIM<br>H <input checked="" type="checkbox"/> DISROBED PARTIALLY<br>I <input checked="" type="checkbox"/> DISROBED FULLY<br>J <input checked="" type="checkbox"/> BLINDFOLDED VICTIM<br>K <input checked="" type="checkbox"/> MADE THREATS<br>L <input checked="" type="checkbox"/> FIRED WEAPON<br>M <input checked="" type="checkbox"/> SNATCHED PURSE<br>N <input checked="" type="checkbox"/> DEMANDED MONEY<br>O <input checked="" type="checkbox"/> PROPERTY<br>P <input checked="" type="checkbox"/> OTHER:  |  |
|  | 69. PROPERTY ATTACKED<br>A <input checked="" type="checkbox"/> CURRENCY, NOTES, ETC.<br>B <input checked="" type="checkbox"/> JEWELRY, PRECIOUS METAL<br>C <input checked="" type="checkbox"/> CLOTHING & FURS<br>D <input checked="" type="checkbox"/> OFFICE EQUIPMENT<br>E <input checked="" type="checkbox"/> TELEVISION, RADIOS, VCR, STEREO, ETC.<br>F <input checked="" type="checkbox"/> FIREARMS<br>G <input checked="" type="checkbox"/> HOUSEHOLD GOODS, APPLIANCES, ETC.<br>H <input checked="" type="checkbox"/> CONSUMABLE GOODS<br>I <input checked="" type="checkbox"/> LIVESTOCK<br>J <input checked="" type="checkbox"/> OTHER:   |   | 70. METHOD OF DEPARTURE<br>A <input checked="" type="checkbox"/> VICTIM'S VEHICLE<br>B <input checked="" type="checkbox"/> AWAITING VEHICLE<br>C <input checked="" type="checkbox"/> NO PLATE ON VEHICLE<br>D <input checked="" type="checkbox"/> VEHICLE KNOWN<br>E <input checked="" type="checkbox"/> BICYCLE<br>F <input checked="" type="checkbox"/> MOTORCYCLE<br>G <input checked="" type="checkbox"/> MOPED<br>H <input checked="" type="checkbox"/> FOOT<br>I <input checked="" type="checkbox"/> UNKNOWN<br>J <input checked="" type="checkbox"/> OTHER:   |   | 71. WEAPON USED<br>A <input checked="" type="checkbox"/> HANDGUN<br>B <input checked="" type="checkbox"/> REVOLVER<br>C <input checked="" type="checkbox"/> SEMI-AUTO<br>D <input checked="" type="checkbox"/> BLUE<br>E <input checked="" type="checkbox"/> STEEL<br>F <input checked="" type="checkbox"/> NICKEL<br>G <input checked="" type="checkbox"/> 1 - 2 1/2 INCHES<br>H <input checked="" type="checkbox"/> 2 1/2 - 4 INCHES<br>I <input checked="" type="checkbox"/> 4 - 8 INCHES<br>J <input checked="" type="checkbox"/> LONGER THAN 8 INCHES<br>K <input checked="" type="checkbox"/> .38<br>L <input checked="" type="checkbox"/> .45<br>M <input checked="" type="checkbox"/> OTHER   |  | 72. USE OF WEAPON<br>A <input checked="" type="checkbox"/> SHOTS WEAPON<br>B <input checked="" type="checkbox"/> FIRES AT VICTIM<br>C <input checked="" type="checkbox"/> WARNING SHOT<br>D <input checked="" type="checkbox"/> BRANDISHES WEAPON<br>E <input checked="" type="checkbox"/> STABBED VICTIM<br>F <input checked="" type="checkbox"/> BLUDGEONED<br>G <input checked="" type="checkbox"/> STRANGLES VICTIM<br>H <input checked="" type="checkbox"/> OTHER  |  |
| VICTIM/WITNESS INFORMATION<br>□ ADDITIONAL NAMES IN NARRATIVE  | 104. CAN VICTIM I.D. SUSPECT<br>[YES] <input checked="" type="checkbox"/> [NO] <input type="checkbox"/>   |   | 109. PHYS. CONDITION<br>SUSPECT<br>1 <input checked="" type="checkbox"/> ACNE<br>2 <input checked="" type="checkbox"/> DARK<br>3 <input checked="" type="checkbox"/> FRECKLED<br>4 <input checked="" type="checkbox"/> FAIR<br>5 <input checked="" type="checkbox"/> MEDIUM<br>6 <input checked="" type="checkbox"/> OLIVE<br>7 <input checked="" type="checkbox"/> ACNE SCARS<br>8 <input checked="" type="checkbox"/> RUDDY<br>9 <input checked="" type="checkbox"/> TAN<br>10 <input checked="" type="checkbox"/> FACIAL SCARS<br>11 <input checked="" type="checkbox"/> FACIAL TATTOOS<br>12 <input checked="" type="checkbox"/> TATTOOS/HAND<br>13 <input checked="" type="checkbox"/> TATTOOS/F. ARMS<br>14 <input checked="" type="checkbox"/> TATTOOS/SHLDR<br>15 <input checked="" type="checkbox"/> TATTOOS/BICEPS<br>16 <input checked="" type="checkbox"/> TATTOOS/CHEST<br>17 <input checked="" type="checkbox"/> OTHER |   | 112. APPEARANCE<br>SUSPECT<br>1 <input checked="" type="checkbox"/> DIRTY<br>2 <input checked="" type="checkbox"/> FLASHY<br>3 <input checked="" type="checkbox"/> ATTRACTIVE<br>4 <input checked="" type="checkbox"/> MILITARY<br>5 <input checked="" type="checkbox"/> UNKEMPT<br>6 <input checked="" type="checkbox"/> ODOROUS<br>7 <input checked="" type="checkbox"/> NEAT<br>8 <input checked="" type="checkbox"/> CASUAL<br>9 <input checked="" type="checkbox"/> GROOMED<br>10 <input checked="" type="checkbox"/> OTHER  |  | 108. SPEECH<br>SUSPECT<br>1 <input checked="" type="checkbox"/> LOUD<br>2 <input checked="" type="checkbox"/> SOFT<br>3 <input checked="" type="checkbox"/> MEDIUM<br>4 <input checked="" type="checkbox"/> MONOTONE<br>5 <input checked="" type="checkbox"/> HIGH PITCH<br>6 <input checked="" type="checkbox"/> LOW PITCH<br>7 <input checked="" type="checkbox"/> NASAL<br>8 <input checked="" type="checkbox"/> ACCENT<br>9 <input checked="" type="checkbox"/> LISP<br>10 <input checked="" type="checkbox"/> STUTTER<br>11 <input checked="" type="checkbox"/> RASPY<br>12 <input checked="" type="checkbox"/> OFFENSIVE<br>13 <input checked="" type="checkbox"/> NON-ENGLISH<br>14 <input checked="" type="checkbox"/> PLEASANT<br>15 <input checked="" type="checkbox"/> QUIET<br>16 <input checked="" type="checkbox"/> MUMBLE<br>17 <input checked="" type="checkbox"/> TALKATIVE<br>18 <input checked="" type="checkbox"/> DISGUISED<br>19 <input checked="" type="checkbox"/> RAPID<br>20 <input checked="" type="checkbox"/> SLOW<br>21 <input checked="" type="checkbox"/> SLURRED |  |
|  | 103. VICTIM/SUSPECT RELATIONSHIP<br>1 <input checked="" type="checkbox"/> RELATIVE<br>2 <input checked="" type="checkbox"/> SPOUSE<br>3 <input checked="" type="checkbox"/> FRIEND<br>4 <input checked="" type="checkbox"/> COLLEAGUE<br>5 <input checked="" type="checkbox"/> CUSTOMER<br>6 <input checked="" type="checkbox"/> NEIGHBOR<br>7 <input checked="" type="checkbox"/> UNKNOWN  |   | 105. DEMEANOR<br>SUSPECT<br>1 <input checked="" type="checkbox"/> ANGRY<br>2 <input checked="" type="checkbox"/> CALM<br>3 <input checked="" type="checkbox"/> NERVOUS<br>4 <input checked="" type="checkbox"/> IRRATIONAL<br>5 <input checked="" type="checkbox"/> EXPERT<br>6 <input checked="" type="checkbox"/> VIOLENT<br>7 <input checked="" type="checkbox"/> REGRETEFUL<br>8 <input checked="" type="checkbox"/> POLITE<br>9 <input checked="" type="checkbox"/> DRUNK<br>10 <input checked="" type="checkbox"/> STUPOROUS<br>11 <input checked="" type="checkbox"/> UNKNOWN<br>12 <input checked="" type="checkbox"/> OTHER   |   | 111. FACIAL HAIR<br>SUSPECT<br>1 <input checked="" type="checkbox"/> CLEAN<br>2 <input checked="" type="checkbox"/> MUSTACHE<br>3 <input checked="" type="checkbox"/> FU MANCHU<br>4 <input checked="" type="checkbox"/> GOATEE<br>5 <input checked="" type="checkbox"/> UNSHAVEN<br>6 <input checked="" type="checkbox"/> BEARD NEAT<br>7 <input checked="" type="checkbox"/> BEARD WILD<br>8 <input checked="" type="checkbox"/> SIDE BURN<br>9 <input checked="" type="checkbox"/> LOWER LIP<br>10 <input checked="" type="checkbox"/> UNKNOWN   |  | 114. SHIRT<br>SUSPECT<br>1 <input checked="" type="checkbox"/> LIGHT<br>2 <input checked="" type="checkbox"/> DARK<br>3 <input checked="" type="checkbox"/> DRESS<br>4 <input checked="" type="checkbox"/> T-SHIRT<br>5 <input checked="" type="checkbox"/> OTHER   |  |
| 106. MASK<br>SUSPECT<br>1 <input checked="" type="checkbox"/> SKI MASK<br>2 <input checked="" type="checkbox"/> HOSIERY<br>3 <input checked="" type="checkbox"/> HALLOWEEN<br>4 <input checked="" type="checkbox"/> OTHER        |   | 113. HAT<br>SUSPECT<br>1 <input checked="" type="checkbox"/> BASEBALL<br>2 <input checked="" type="checkbox"/> KNIT<br>3 <input checked="" type="checkbox"/> COWBOY<br>4 <input checked="" type="checkbox"/> DRESS<br>5 <input checked="" type="checkbox"/> OTHER           |  | 115. PANTS<br>SUSPECT<br>1 <input checked="" type="checkbox"/> LIGHT<br>2 <input checked="" type="checkbox"/> DARK<br>3 <input checked="" type="checkbox"/> DRESS<br>4 <input checked="" type="checkbox"/> WORK<br>5 <input checked="" type="checkbox"/> JEANS<br>6 <input checked="" type="checkbox"/> OTHER |   | 116. SHOES<br>SUSPECT<br>1 <input checked="" type="checkbox"/> LIGHT<br>2 <input checked="" type="checkbox"/> DARK<br>3 <input checked="" type="checkbox"/> DRESS<br>4 <input checked="" type="checkbox"/> TENNIS<br>5 <input checked="" type="checkbox"/> WORK BOOT<br>6 <input checked="" type="checkbox"/> COWBOY<br>7 <input checked="" type="checkbox"/> "COASTER"<br>8 <input checked="" type="checkbox"/> OTHER |   |  |
| 107. GLASSES<br>SUSPECT<br>1 <input checked="" type="checkbox"/> SUNGLASSES<br>2 <input checked="" type="checkbox"/> WIRE FRAME<br>3 <input checked="" type="checkbox"/> PLASTIC<br>4 <input checked="" type="checkbox"/> MIRROR |   | 117. TEETH<br>SUSPECT<br>1 <input checked="" type="checkbox"/> CROOKED<br>2 <input checked="" type="checkbox"/> BRACES<br>3 <input checked="" type="checkbox"/> DECAYED<br>4 <input checked="" type="checkbox"/> MISSING<br>5 <input checked="" type="checkbox"/> GOLD CAPS |  | 118. HAND USE<br>SUSPECT<br>1 <input checked="" type="checkbox"/> UNKNOWN<br>2 <input checked="" type="checkbox"/> RIGHT<br>3 <input checked="" type="checkbox"/> LEFT  |   | 110. BUILD<br>SUSPECT<br>1 <input checked="" type="checkbox"/> TALL<br>2 <input checked="" type="checkbox"/> SHORT<br>3 <input checked="" type="checkbox"/> THIN<br>4 <input checked="" type="checkbox"/> HEAVY SET<br>5 <input checked="" type="checkbox"/> UNKNOWN   |   |  |
| (USE THIS SPACE TO EXPLAIN ANY OF THE ABOVE)   |   |   |  |   |   |  |   |  |
| REPORTING DEPUTY<br>C. DEAN 12-0108  |   |   |  | DATE / TIME<br>1003040458   |   | REVIEWED BY:   |   |  |
|  |   |   |  |   |   | DATE   |   |  |

**TULARE COUNTY SHERIFF'S DEPARTMENT**  
**CONTINUATION REPORT - 5400**

**CASE NUMBER**  
04-15685

**CRIME: INFORMATION**

**PAGE 1**

ON 10-02-04 AT APPROXIMATELY 2235 HOURS I WAS DISPATCHED TO THE EL CAMPESENO BAR, 807 SOUTH MIRAGE STREET IN LINDSAY, IN REGARD TO STRIPPER INSIDE THE BAR.

I ARRIVED AND ENTERED THE BAR. I NOTICED TWO FEMALES WEARING BATHING SUIT BIKINI TOPS AND G-STRING UNDERWEAR. ONE OF THE FEMALES WAS SITTING ON THE LAP OF A MALE FACE TO FACE GRINDING HER GROIN AGAINST HIS. THE OTHER FEMALE WAS SITTING ON A MALES LAP WITH HER BACK TOWARD HIM MOVING UP AND DOWN. BOTH FEMALES HAD SEVERAL DOLLAR BILLS IN EACH HAND.

I CONTACTED THE BARTENDER AND REQUESTED HER PERMIT FOR HAVING DANCERS. THE BARTENDER HANDED ME A PERMIT THAT STATED "PUBLIC DANCE HALL LICENSE." THE PERMIT WAS ISSUED TO EL CAMPESENO BAR ISSUED 06-28-04 AND EXPIRED 06-30-04. THE LICENSE NUMBER IS 04/05DH08. I DID NOT SEE ANYONE ACTING AS SECURITY.

WHEN I LEFT THE BAR, I NOTICED SEVERAL BEER CANS IN THE PARKING LOT AND ACROSS THE STREET. I LOCATED TWO PEOPLE BEHIND THE BAR DRINKING BEER AND TOLD THEM TO GO BACK INSIDE. I SAW FOUR MALE URINATING IN THE REAR PARKING LOT AND COUNSELED THEM.

PEOPLE HAVE TOLD ME THAT THE DANCERS HAVE STRIPPED TO THE NUDE. I HAVE ALSO HEARD OF DRUG ACTIVITY INSIDE AND OUTSIDE OF THE BAR.

CASE STATUS: CLOSED

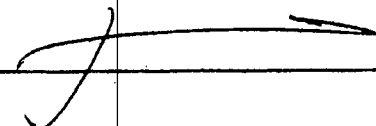
\*\*\*\*\*FORWARD REPORT TO A.B.C.\*\*\*\*\*

**REPORTING DEPUTY:**

C. DEAN D-0108

DATE/TIME: October 3, 2004 (4:58am)

**REVIEWED BY:**



# TULARE COUNTY SHERIFF'S DEPARTMENT

|   |   |   |                                    |   |                                 |  |                               |
|---|---|---|------------------------------------|---|---------------------------------|--|-------------------------------|
| <input checked="" type="checkbox"/> CRIME REPORT  |   | <input type="checkbox"/> INCIDENT REPORT                                |                                    | <input type="checkbox"/> WARRANT                      |                                 | CASE NUMBER <b>04-18492</b>  |                               |
| STATISTICAL CATEGORY<br><input type="checkbox"/> AG CRIME <input type="checkbox"/> NARCOTICS <input type="checkbox"/> GANG <input type="checkbox"/> HATE CRIME <input type="checkbox"/> DOMESTIC <input type="checkbox"/> JUVENILE <input type="checkbox"/> CORRECTIONS |   |   |                                    |   |                                 |  |                               |
| SECTION<br><b>P.C. 242</b>  |   |   | DEFINITION<br><b>BATTERY</b>       |   |                                 | FELONY/MISD<br><b>MISD</b>   |                               |
| LOCATION OF OCCURRENCE<br><b>807 S. MIRAGE LINDSEY</b>  |   |   | BEAT<br><b>20A</b>                 |   | PROPERTY LOSS & PROPERTY DAMAGE |  |                               |
| DATE OCC. FROM TO:<br><b>11-21-04</b>   |   | TIME OCC. FROM TO:<br><b>2100</b>                                       |                                    | DAY OCC.<br><b>SUNDAY</b>                             |                                 | DATE / TIME DISP<br><b>11-21-04 / 2107</b>   |                               |
|   |   |   |                                    | TIME ARR<br><b>2112</b>                               |                                 | TIME COMP<br><b>2141</b>   |                               |
| V<br>I<br>C<br>T<br>I<br>M  | CODE<br><b>U-1</b>                            | NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS<br><b>OCHOA, JESUS</b>       |                                    |   | DATE OF BIRTH<br>[REDACTED]     |  | SEX<br><b>M</b>               |
|   | RESIDENCE ADDRESS<br>[REDACTED]               |   |                                    | OCCUPATION/BUS ADDRESS<br>[REDACTED]                  |                                 | RESIDENCE PHONE<br>[REDACTED]  |                               |
|   | CODE<br><b>U-2</b>                            | NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS<br>[REDACTED]                |                                    |   | DATE OF BIRTH<br>[REDACTED]     |  | SEX<br>[REDACTED]             |
|   | RESIDENCE ADDRESS<br>[REDACTED]               |   |                                    | OCCUPATION/BUS ADDRESS<br>[REDACTED]                  |                                 | RESIDENCE PHONE<br>[REDACTED]  |                               |
| S<br>U<br>S<br>P<br>E<br>C<br>T   | CODE<br><b>S-1</b>                            | NAME (LAST, FIRST MIDDLE)<br><b>UNKNOWN / WHT SHIRT &amp; BRO PANTS</b> |                                    |   | AKA'S<br>[REDACTED]             |  | SEX<br>[REDACTED]             |
|   | HGT.<br><b>6'4"</b>                           | WGT.<br>[REDACTED]  | EYES<br>[REDACTED]                 | HAIR<br>[REDACTED]                                    | HAIR STYLE<br>[REDACTED]        | DATE OF BIRTH<br>[REDACTED]  | DL / SS NUMBER<br><b>UNK</b>  |
|   | ADDRESS / POSSIBLE LOCATION<br><b>UNKNOWN</b> |   |                                    |   |                                 | RESIDENCE PHONE<br><b>UNK</b>  |                               |
|   | CODE<br><b>S-2</b>                            | NAME (LAST, FIRST MIDDLE)<br><b>UNKNOWN / RD SHIRT &amp; BLUE PANTS</b> |                                    |   | AKA'S<br>[REDACTED]             |  | SEX<br>[REDACTED]             |
|   | HGT.<br><b>5'7"</b>                           | WGT.<br>[REDACTED]  | EYES<br>[REDACTED]                 | HAIR<br>[REDACTED]                                    | HAIR STYLE<br>[REDACTED]        | DATE OF BIRTH<br>[REDACTED]  | DL / SS NUMBER<br><b>UNIC</b> |
|   | ADDRESS / POSSIBLE LOCATION<br><b>UNKNOWN</b> |   |                                    |   |                                 | RESIDENCE PHONE<br><b>UNIC</b>   |                               |
| V<br>E<br>H<br>I<br>C<br>L<br>E   | VIC [ ]                                       | SUS. <input checked="" type="checkbox"/>                                | YEAR                               | MAKE  | MODEL                           | COLOR  | STYLE                         |
|   | NAME OF R/O<br><b>VIC - SUS</b>               |   | ADDRESS OF R/O<br><b>VIC - SUS</b> |   |                                 |  |                               |
|   | OTHER VEHICLE INFORMATION                     |   |                                    |   |                                 |  |                               |
| ODOR OF ALCOHOL<br>YES NO   |   | ABLE TO CARE FOR SELF<br>YES NO   |                                    | SPEECH<br>[ ] NORMAL<br>[ ] SLURRED<br>[ ] INCOHERENT |                                 | CLOTHING<br>[ ] NORMAL<br>[ ] SOILED<br>[ ] DISARRANGED  |                               |
|   |   |   |                                    | BALANCE<br>[ ] GOOD<br>[ ] POOR<br>[ ] UNSTEADY       |                                 | ATTITUDE<br>[ ] COOPERATIVE<br>[ ] ANTAGONISTIC<br>[ ] ANGRY   |                               |
| NARRATIVE   |   |   |                                    |   |                                 |  |                               |
| - REFER TO NARRATIVE -  |   |   |                                    |   |                                 |  |                               |
| <b>S-3 UNKNOWN NAME / LARGE CAMO JACKET MALE / HISP / 5'-6" / BRO / BLK</b><br><b>UNKNOWN ADDRESS</b>   |   |   |                                    |   |                                 |  |                               |
| <b>S-4 BOTH VICTIMS UNABLE TO PROVIDE DESCRIPTION - MALE / HISP</b><br><b>S-5 BOTH VICTIMS UNABLE TO PROVIDE DESCRIPTION - MALE / HISP</b>  |   |   |                                    |   |                                 |  |                               |
| VICTIM OF VIOLENT CRIME NOTIFICATION MADE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO  |   |   |                                    |   |                                 |  |                               |
| CASE STATUS <input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> INACTIVE <input type="checkbox"/> CLOSED <input type="checkbox"/> UNFOUNDED   |   |   |                                    |   |                                 | NON-PROS Y <input checked="" type="checkbox"/>   |                               |
| NEWS REL Y <input checked="" type="checkbox"/> COPIES TO: DET PAT D/A JUV CPS OTHER   |   |   |                                    |   |                                 | SUP-RESP Y <input checked="" type="checkbox"/><br>LAB-RESP Y <input checked="" type="checkbox"/><br>DET-RESP Y <input checked="" type="checkbox"/> |                               |
| REPORTING OFFICER<br><b>P. HERRERA</b>  |   | I.D. #<br><b>H9062</b>  |                                    | DATE/TIME<br><b>11-21-04 / 2107</b>                   |                                 | REVIEWED BY: <b>[Signature]</b><br>DATE<br><b>11/22/04</b>   |                               |

|  |  |   |   |   |  |  |  |  |
|--|--|---|---|---|--|--|--|--|
| PHYSICAL EVIDENCE<br>[YES] [NO]  |  | EVIDENCE FORM ATTACHED ?<br>[YES] [NO]  |   | ENGLISH SPEAKING<br>[YES] [NO]  |  | NAME OF INTERPRETER  |  |  |
| PHOTOGRAPHS?<br>[YES] [NO]   |  | HOW MANY?<br>B/W COLOR  |   | SHOE TRACKSTYLES [YES] [NO]<br>TIRE TRACKS? [YES] [NO]  |  | LATENT FINGERPRINTS? [YES] [NO]<br>SUBMITTED TO CAL ID.? [YES] [NO]  |  |  |
| LOCATION OF OCCURRENCE   | 60. RESIDENCE<br>A <input type="checkbox"/> APARTMENT<br>B <input type="checkbox"/> CONDOMINIUM<br>C <input type="checkbox"/> DUP/TRI/FOURPLEX<br>D <input type="checkbox"/> GARAGE ATTACHED<br>E <input type="checkbox"/> GARAGE DETACHED<br>F <input type="checkbox"/> HOTEL/MOTEL ROOM(S)<br>G <input type="checkbox"/> SINGLE STORY HOUSE<br>H <input type="checkbox"/> MULTI-STORY HOUSE<br>I <input type="checkbox"/> MOBILE HOME<br>J <input type="checkbox"/> OTHER:   |   | 61. BUSINESS<br>A <input type="checkbox"/> APPLIANCE STORE<br>B <input type="checkbox"/> BANK/SAVINGS & LOAN<br>C <input type="checkbox"/> BAR<br>D <input type="checkbox"/> CAR/MOTORCYCLE SALES<br>E <input type="checkbox"/> COIN-OP MACHINE<br>F <input type="checkbox"/> CONSTRUCTION SITE<br>G <input type="checkbox"/> CONVENIENCE STORE<br>H <input type="checkbox"/> GAS STATION/GARAGE<br>I <input type="checkbox"/> GIFT/CANDY STORE<br>J <input type="checkbox"/> FENCED STORAGE  |   | S <input type="checkbox"/> MANUFACTURING CO<br>T <input type="checkbox"/> MEDICAL OFFICE<br>U <input type="checkbox"/> MOTEL/HOTEL<br>V <input type="checkbox"/> OFFICE BUILDING<br>W <input type="checkbox"/> PAYN/SHOP/SECONDHAND<br>X <input type="checkbox"/> RESTAURANT/FASTFOOD<br>Y <input type="checkbox"/> SPORTING GOODS/GUNS<br>Z <input type="checkbox"/> SUPERMARKET<br>BB <input type="checkbox"/> WAREHOUSE<br>CC <input type="checkbox"/> OTHER<br>Q <input type="checkbox"/> LAUNDROMAT/CLEANERS<br>R <input type="checkbox"/> LIQUOR STORE   |  | 62. PUBLIC PREMISES<br>A <input type="checkbox"/> CHURCH<br>B <input type="checkbox"/> HOSPITAL<br>C <input type="checkbox"/> PARK/PLAYGROUND<br>D <input type="checkbox"/> PARKING LOT (COUNTY)<br>E <input type="checkbox"/> PARKING LOT (OTHER)<br>F <input type="checkbox"/> PUBLIC BUILDING<br>G <input type="checkbox"/> SCHOOL<br>H <input type="checkbox"/> SHOPPING MALL<br>I <input type="checkbox"/> STREET/HIGHWAY/ALLEY<br>J <input type="checkbox"/> OTHER   |  |
|  | 63. OTHER<br>A <input type="checkbox"/> VEHICLE<br>B <input type="checkbox"/> CARPORT<br>C <input type="checkbox"/> OPEN SPACE<br>D <input type="checkbox"/> LOT/YARD<br>E <input type="checkbox"/> GROVE/ORCHARD/VINE ETC.<br>F <input type="checkbox"/> STORAGE BUILDING<br>G <input type="checkbox"/> UNKNOWN<br>H <input type="checkbox"/> OTHER   |   |   |   |  |  |  |  |
| MODUS OPERANDI<br>Q ADDITIONAL INFORMATION IN NARRATIVE  | 64. POINT OF ENTRY<br>A <input type="checkbox"/> UNKNOWN<br>B <input type="checkbox"/> FRONT<br>C <input type="checkbox"/> REAR<br>D <input type="checkbox"/> SIDE<br>E <input type="checkbox"/> GROUND LEVEL<br>F <input type="checkbox"/> UPPER LEVEL<br>G <input type="checkbox"/> DOOR<br>H <input type="checkbox"/> WINDOW<br>I <input type="checkbox"/> SLIDING GLASS<br>J <input type="checkbox"/> DUCT/VENT<br>K <input type="checkbox"/> ADJ. BLDG.<br>L <input type="checkbox"/> ROOF/FLOOR<br>M <input type="checkbox"/> WALL<br>N <input type="checkbox"/> GARAGE<br>O <input type="checkbox"/> BASEMENT<br>P <input type="checkbox"/> TRUNK/ENGINE<br>Q <input type="checkbox"/> OTHER:                   |   | 65. METHOD OF ENTRY<br>A <input type="checkbox"/> ATTEMPT ONLY<br>B <input type="checkbox"/> NO FORCE<br>C <input type="checkbox"/> KEY SLP<br>D <input type="checkbox"/> BODILY FORCE<br>E <input type="checkbox"/> SAW/DRILL<br>F <input type="checkbox"/> HID IN BLDG.<br>G <input type="checkbox"/> PLIERS<br>H <input type="checkbox"/> PIPE WRENCH<br>I <input type="checkbox"/> TIRE IRON<br>J <input type="checkbox"/> UNK. PRY TOOL<br>K <input type="checkbox"/> BOLT CUTTERS<br>L <input type="checkbox"/> PUNCH<br>M <input type="checkbox"/> WINDOW SMASH<br>N <input type="checkbox"/> DOOR KICK<br>O <input type="checkbox"/> SCREWDRIVER<br>P <input type="checkbox"/> OTHER: |   | 66. OBJECT OF ATTACK<br>A <input type="checkbox"/> CASH REG./DRAWER<br>B <input type="checkbox"/> VICTIM/OWNER/EMPLOYEE<br>C <input type="checkbox"/> SAFE BOX<br>D <input type="checkbox"/> VENDING MACHINE<br>E <input type="checkbox"/> DISPLAY ITEMS<br>F <input type="checkbox"/> ATTIC<br>G <input type="checkbox"/> BEDROOM(S)<br>H <input type="checkbox"/> BATHROOM(S)<br>I <input type="checkbox"/> FAMILY ROOM/DEN<br>J <input type="checkbox"/> GARAGE/CARPORT<br>K <input type="checkbox"/> KITCHEN<br>L <input type="checkbox"/> LIVING ROOM<br>M <input type="checkbox"/> STORAGE AREA<br>N <input type="checkbox"/> PURSE/WALLET<br>O <input type="checkbox"/> CASH<br>P <input type="checkbox"/> OTHER: |  | 67. HOW ATTACKED PERSON<br>A <input type="checkbox"/> INFLECTS INJURY<br>B <input type="checkbox"/> FORCED VICTIM<br>C <input type="checkbox"/> THREAT OF RETAL<br>D <input type="checkbox"/> BOUND VICTIM<br>E <input type="checkbox"/> RIP/CUT CLOTHING<br>F <input type="checkbox"/> MOLESTED VICTIM<br>G <input type="checkbox"/> STRUCK VICTIM<br>H <input type="checkbox"/> DISROBED PARTIALLY<br>I <input type="checkbox"/> DISROBED FULLY<br>J <input type="checkbox"/> BLINDFOLDED VICTIM<br>K <input type="checkbox"/> MADE THREATS<br>L <input type="checkbox"/> FIRED WEAPON<br>M <input type="checkbox"/> SNATCHED PURSE<br>N <input type="checkbox"/> DEMANDED MONEY<br>O <input type="checkbox"/> PROPERTY<br>P <input type="checkbox"/> OTHER: |  |
|  | 68. HOW ATTACKED PROPERTY<br>A <input type="checkbox"/> VANDALIZED<br>B <input type="checkbox"/> RANSACKED<br>C <input type="checkbox"/> MATCHES FOR LIGHT<br>D <input type="checkbox"/> ALARM DISABLED<br>E <input type="checkbox"/> KNEW LOCATION VALUABLES<br>F <input type="checkbox"/> SELECTIVE IN LOOT<br>G <input type="checkbox"/> VEHICLE NEEDED<br>H <input type="checkbox"/> UNOCCUPIED BLDG.<br>I <input type="checkbox"/> OCCUPIED BLDG.<br>J <input type="checkbox"/> PREPARES EXIT<br>K <input type="checkbox"/> USED LOCKOUT<br>L <input type="checkbox"/> SUSPECT ARMED<br>M <input type="checkbox"/> SHUT OFF POWER<br>N <input type="checkbox"/> STASHED LOOT<br>O <input type="checkbox"/> OTHER: |   |   |   |  |  |  |  |
| VICTIM/WITNESS INFORMATION<br>Q ADDITIONAL NAMES IN NARRATIVE  | 69. PROPERTY ATTACKED<br>A <input type="checkbox"/> CURRENCY, NOTES, ETC.<br>B <input type="checkbox"/> JEWELRY, PRECIOUS METAL<br>C <input type="checkbox"/> CLOTHING & FURS<br>D <input type="checkbox"/> OFFICE EQUIPMENT<br>E <input type="checkbox"/> TELEVISION, RADIOS, VCR, STEREOS, ETC.<br>F <input type="checkbox"/> FIREARMS<br>G <input type="checkbox"/> HOUSEHOLD GOODS, APPLIANCES, ETC.<br>H <input type="checkbox"/> CONSUMABLE GOODS<br>I <input type="checkbox"/> LIVESTOCK<br>J <input type="checkbox"/> OTHER:   |   | 70. METHOD OF DEPARTURE<br>A <input type="checkbox"/> VICTIM'S VEHICLE<br>B <input type="checkbox"/> AWAITING VEHICLE<br>C <input type="checkbox"/> NO PLATE ON VEHICLE<br>D <input type="checkbox"/> VEHICLE KNOWN<br>E <input type="checkbox"/> BIICYCLE<br>F <input type="checkbox"/> MOTORCYCLE<br>G <input type="checkbox"/> MOPED<br>H <input type="checkbox"/> FOOT<br>I <input type="checkbox"/> UNKNOWN<br>J <input type="checkbox"/> OTHER:   |   | 71. WEAPON USED<br>A <input type="checkbox"/> HANDGUN<br>B <input type="checkbox"/> REVOLVER<br>C <input type="checkbox"/> SEMI-AUTO<br>D <input type="checkbox"/> BLUE<br>E <input type="checkbox"/> 3/STEEL<br>F <input type="checkbox"/> NICKEL<br>G <input type="checkbox"/> 1 - 2 1/2 - INCHES<br>H <input type="checkbox"/> 2 1/2 - 4 INCHES<br>I <input type="checkbox"/> 4 - 6 INCHES<br>J <input type="checkbox"/> LONGER THAN 6 INCHES<br>K <input type="checkbox"/> .38<br>L <input type="checkbox"/> .45<br>M <input type="checkbox"/> OTHER   |  | B <input type="checkbox"/> LONG GUN<br>C <input type="checkbox"/> RIFLE<br>D <input type="checkbox"/> ASSAULT RIFLE<br>E <input type="checkbox"/> SHOTGUN<br>F <input type="checkbox"/> OTHER<br>G <input type="checkbox"/> HANDS/FEET<br>H <input type="checkbox"/> POCKET KNIFE<br>I <input type="checkbox"/> HUNTING KNIFE<br>J <input type="checkbox"/> BUTCHER KNIFE<br>K <input type="checkbox"/> TOY GUN<br>L <input type="checkbox"/> SIMULATED WEAPON<br>M <input type="checkbox"/> OTHER   |  |
|  | 72. USE OF WEAPON<br>A <input type="checkbox"/> SHOTS WEAPON<br>B <input type="checkbox"/> FIRES AT VICTIM<br>C <input type="checkbox"/> WARNING SHOT<br>D <input type="checkbox"/> BRANDISHES WEAPON<br>E <input type="checkbox"/> STABS/CUTS VICTIM<br>F <input type="checkbox"/> BLUDGEONS<br>G <input type="checkbox"/> STRANGLES VICTIM<br>H <input type="checkbox"/> OTHER   |   |   |   |  |  |  |  |
| 104. CAN VICTIM I.D. SUSPECT<br>[YES] [NO]   |  | 109. PHYS. CONDITION<br>1 SUSPECT 2<br>A <input type="checkbox"/> ACNE<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> FRECKLED<br>D <input type="checkbox"/> FAIR<br>E <input type="checkbox"/> MEDIUM<br>F <input type="checkbox"/> OLIVE<br>G <input type="checkbox"/> ACNE SCARS<br>H <input type="checkbox"/> RUDDY<br>I <input type="checkbox"/> TAN<br>J <input type="checkbox"/> FACIAL SCARS<br>K <input type="checkbox"/> FACIAL TATTOOS<br>L <input type="checkbox"/> TATTOOS/HAND<br>M <input type="checkbox"/> TATTOOS/F. ARMS<br>N <input type="checkbox"/> TATTOOS/SHLDR<br>O <input type="checkbox"/> TATTOOS/BICEPS<br>P <input type="checkbox"/> TATTOOS/CHEST<br>Q <input type="checkbox"/> OTHER |   | 112. APPEARANCE<br>1 SUSPECT 2<br>A <input type="checkbox"/> DIRTY<br>B <input type="checkbox"/> FLASHY<br>C <input type="checkbox"/> ATTRACTIVE<br>D <input type="checkbox"/> MILITARY<br>E <input type="checkbox"/> UNKEMPT<br>F <input type="checkbox"/> ODOROUS<br>G <input type="checkbox"/> NEAT<br>H <input type="checkbox"/> CASUAL<br>I <input type="checkbox"/> GROOMED<br>J <input type="checkbox"/> OTHER |  | 108. SPEECH<br>1 SUSPECT 2<br>A <input type="checkbox"/> LOUD<br>B <input type="checkbox"/> SOFT<br>C <input type="checkbox"/> MEDIUM<br>D <input type="checkbox"/> MONOTONE<br>E <input type="checkbox"/> HIGH PITCH<br>F <input type="checkbox"/> LOW PITCH<br>G <input type="checkbox"/> NASAL<br>H <input type="checkbox"/> ACCENT<br>I <input type="checkbox"/> LISP<br>J <input type="checkbox"/> STUTTER<br>K <input type="checkbox"/> RASPY<br>L <input type="checkbox"/> OFFENSIVE<br>M <input type="checkbox"/> NON-ENGLISH<br>N <input type="checkbox"/> PLEASANT<br>O <input type="checkbox"/> QUIET<br>P <input type="checkbox"/> MUMBLE<br>Q <input type="checkbox"/> TALKATIVE<br>R <input type="checkbox"/> DISGUISED<br>S <input type="checkbox"/> RAPID<br>T <input type="checkbox"/> SLOW<br>U <input type="checkbox"/> SLURRED |  |  |
| 103. VICTIM/SUSPECT RELATIONSHIP<br>1 2<br>A <input type="checkbox"/> RELATIVE<br>B <input type="checkbox"/> SPOUSE<br>C <input type="checkbox"/> FRIEND<br>D <input type="checkbox"/> COLLEAGUE<br>E <input type="checkbox"/> CUSTOMER<br>F <input type="checkbox"/> NEIGHBOR<br>G <input type="checkbox"/> UNKNOWN |  | 105. DEMEANOR<br>1 SUSPECT 2<br>A <input type="checkbox"/> ANGRY<br>B <input type="checkbox"/> CALM<br>C <input type="checkbox"/> NERVOUS<br>D <input type="checkbox"/> IRRATIONAL<br>E <input type="checkbox"/> EXPERT<br>F <input type="checkbox"/> VIOLENT<br>G <input type="checkbox"/> REGRETFUL<br>H <input type="checkbox"/> POLITE<br>I <input type="checkbox"/> DRUNK<br>J <input type="checkbox"/> STUPOROUS<br>K <input type="checkbox"/> UNKNOWN<br>L <input type="checkbox"/> OTHER  |   | 113. HAT<br>1 SUSPECT 2<br>A <input type="checkbox"/> BASEBALL<br>B <input type="checkbox"/> KNIT<br>C <input type="checkbox"/> COWBOY<br>D <input type="checkbox"/> DRESS<br>E <input type="checkbox"/> OTHER  |  | 114. SHIRT<br>1 SUSPECT 2<br>A <input type="checkbox"/> CLEAN<br>B <input type="checkbox"/> MUSTACHE<br>C <input type="checkbox"/> FU MANCHU<br>D <input type="checkbox"/> GOATEE<br>E <input type="checkbox"/> UNKEMPT<br>F <input type="checkbox"/> BEARD NEAT<br>G <input type="checkbox"/> BEARD WILD<br>H <input type="checkbox"/> SIDE BURN<br>I <input type="checkbox"/> LOWER LIP<br>J <input type="checkbox"/> UNKNOWN  |  |  |
| 106. MASK<br>1 SUSPECT 2<br>A <input type="checkbox"/> SKI MASK<br>B <input type="checkbox"/> HOSIERY<br>C <input type="checkbox"/> HALLOWEEN<br>D <input type="checkbox"/> OTHER  |  |   |   |   |  | 115. PANTS<br>1 SUSPECT 2<br>A <input type="checkbox"/> LIGHT<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> DRESS<br>D <input type="checkbox"/> WORK<br>E <input type="checkbox"/> JEANS<br>F <input type="checkbox"/> OTHER  |  |  |
| 107. GLASSES<br>1 SUSPECT 2<br>A <input type="checkbox"/> SUNGLASSES<br>B <input type="checkbox"/> WIRE FRAME<br>C <input type="checkbox"/> PLASTIC<br>D <input type="checkbox"/> OTHER  |  |   |   |   |  | 117. TEETH<br>1 SUSPECT 2<br>A <input type="checkbox"/> CROOKED<br>B <input type="checkbox"/> BRACES<br>C <input type="checkbox"/> DECAYED<br>D <input type="checkbox"/> MISSING<br>E <input type="checkbox"/> GOLD CAPS   |  |  |
|  |  |   |   |   |  | 118. HAND USE<br>1 SUSPECT 2<br>A <input type="checkbox"/> UNKNOWN<br>B <input type="checkbox"/> RIGHT<br>C <input type="checkbox"/> LEFT  |  |  |
|  |  |   |   |   |  | 119. BUILD<br>1 SUSPECT 2<br>A <input type="checkbox"/> TALL<br>B <input type="checkbox"/> SHORT<br>C <input type="checkbox"/> THIN<br>D <input type="checkbox"/> HEAVY SET<br>E <input type="checkbox"/> UNKNOWN  |  |  |

SE THIS SPACE TO EXPLAIN ANY OF THE ABOVE)

REPORTING DEPUTY

DATE/TIME

REVIEWED BY:

DATE



# TULARE COUNTY SHERIFF'S DEPARTMENT

☒ CRIME REPORT    
 ☐ INCIDENT REPORT    
 ☐ WARRANT    
 CASE NUMBER **04-18492**

STATISTICAL CATEGORY  
☐ AG CRIME   
 ☐ NARCOTICS   
 ☐ GANG   
 ☐ HATE CRIME   
 ☐ DOMESTIC   
 ☐ JUVENILE   
 ☐ CORRECTIONS

SECTION **P.C. 242**    
 DEFINITION **BATTERY**    
 FELONY/MISD ☒    
 TYPE **4500**

LOCATION OF OCCURENCE **807 S. MIRAGE, LINDSEY**    
 BEAT **30A**    
 PROPERTY LOSS & PROPERTY DAMAGE **-**

DATE OCC. FROM TO: **11-21-04**    
 TIME OCC. FROM TO: **2100**    
 DAY OCC. **SUNDAY**    
 DATE / TIME DISP **11-21-04 / 2107**    
 TIME ARR **2112**    
 TIME COMP **2141**

**VICTIM**  
 CODE **U-1**    
 NAME (LAST, FIRST MIDDLE) **[REDACTED]**    
 FIRM IF BUSINESS **[REDACTED]**    
 DATE OF BIRTH **[REDACTED]**    
 SEX **[REDACTED]**    
 RACE **[REDACTED]**  
 RESIDENCE ADDRESS **[REDACTED]**    
 OCCUPATION/BUS ADDRESS **[REDACTED]**    
 RESIDENCE PHONE **[REDACTED]**  
 CODE **U-2**    
 NAME (LAST, FIRST MIDDLE) **[REDACTED]**    
 FIRM IF BUSINESS **[REDACTED]**    
 DATE OF BIRTH **[REDACTED]**    
 SEX **[REDACTED]**    
 RACE **[REDACTED]**  
 RESIDENCE ADDRESS **[REDACTED]**    
 OCCUPATION/BUS ADDRESS **[REDACTED]**    
 RESIDENCE PHONE **[REDACTED]**

**SUSPECT**  
 CODE **S-1**    
 NAME (LAST, FIRST MIDDLE) **UNKNOWN / WHT SHIRT & BRO PANTS**    
 AKA'S **-**    
 SEX **M**    
 RACE **H**  
 HGT. **6'**    
 WGT. **[REDACTED]**    
 EYES **[REDACTED]**    
 HAIR **[REDACTED]**    
 HAIR STYLE **[REDACTED]**    
 DATE OF BIRTH **[REDACTED]**    
 DL / SS NUMBER **UNK**    
 ARR / CITE **-**  
 ADDRESS / POSSIBLE LOCATION **UNKNOWN**    
 RESIDENCE PHONE **UNK**  
 CODE **S-2**    
 NAME (LAST, FIRST MIDDLE) **UNKNOWN / RD SHIRT & BLUE PANTS**    
 AKA'S **-**    
 SEX **M**    
 RACE **H**  
 HGT. **5'4"**    
 WGT. **[REDACTED]**    
 EYES **[REDACTED]**    
 HAIR **[REDACTED]**    
 HAIR STYLE **[REDACTED]**    
 DATE OF BIRTH **[REDACTED]**    
 DL / SS NUMBER **UNIC**    
 ARR / CITE **-**  
 ADDRESS / POSSIBLE LOCATION **UNKNOWN**    
 RESIDENCE PHONE **UNIC**

**VEHICLE**  
 VIC ☐    
 SUS. ☒    
 YEAR **[REDACTED]**    
 MAKE **FORD**    
 MODEL **TEMPO**    
 COLOR **DAKE BLUE**    
 STYLE **4-DOOR**    
 LICENSE **138M R D**    
 STATE **CA**  
 NAME OF R/O **VIC - SUS**    
 ADDRESS OF R/O **VIC - SUS**  
 OTHER VEHICLE INFORMATION **-**

ODOR OF ALCOHOL ☐ YES ☒ NO    
 ABLE TO CARE FOR SELF ☐ YES ☒ NO    
 SPEECH ☐ NORMAL ☐ SLURRED ☐ INCOHERENT    
 CLOTHING ☐ NORMAL ☐ SOILED ☐ DISARRANGED    
 BALANCE ☐ GOOD ☐ POOR ☐ UNSTEADY    
 ATTITUDE ☐ COOPERATIVE ☐ ANTAGONISTIC ☐ ANGRY

NARRATIVE

- REFER TO NARRATIVE -

**S-3 UNKNOWN NAME / LARGE CAMO JACKET MALE / HISP / 5'-6" / BRO / BKK**  
**UNKNOWN ADDRESS**

**S-4 BOTH VICTIMS UNABLE TO PROVIDE DESCRIPTION - MALE / HISP**

**S-5 BOTH VICTIMS UNABLE TO PROVIDE DESCRIPTION - MALE / HISP**

VICTIM OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☒ NO

CASE STATUS ☒ ACTIVE    
 ☐ INACTIVE    
 ☐ CLOSED    
 ☐ UNFOUNDED    
 NON-PROS ☒ Y ☐ N

NEWS REL ☒ Y ☐ N    
 COPIES TO: DET ☐ PAT ☐ JUV ☐ CPS ☐ OTHER ☐    
 SUP-RESP ☒ Y ☐ N    
 LAB-RESP ☒ Y ☐ N    
 DET-RESP ☒ Y ☐ N

REPORTING OFFICER **P. HERRERA**    
 I.D. # **H9062**    
 DATE/TIME **11-21-04 / 2107**    
 REVIEWED BY: **[Signature]**    
 DATE **11/22/04**

| PHYSICAL EVIDENCE<br>[YES] [NO]                               |  | EVIDENCE FORM ATTACHED?<br>[YES] [NO]  |   | ENGLISH SPEAKING<br>[YES] [NO]   |  | NAME OF INTERPRETER   |   |  |  |  |
|---|--|--|---|--|--|---|---|--|--|--|
| PHOTOGRAPHS?<br>[YES] [NO]                                    |  | HOW MANY?<br>B/W COLOR   |   | SHOE TRACKSTYLES [YES] [NO]<br>TIRE TRACKS? [YES] [NO]   |  | LATENT FINGERPRINTS? [YES] [NO]<br>SUBMITTED TO CAL ID.? [YES] [NO] |   |  |  |  |
| LOCATION OF OCCURRENCE  | 60. RESIDENCE<br>A <input type="checkbox"/> APARTMENT<br>B <input type="checkbox"/> CONDOMINIUM<br>C <input type="checkbox"/> DUP/TRI/FOURPLEX<br>D <input type="checkbox"/> GARAGE ATTACHED<br>E <input type="checkbox"/> GARAGE DETACHED<br>F <input type="checkbox"/> HOTEL/MOTEL ROOM(S)<br>G <input type="checkbox"/> SINGLE STORY HOUSE<br>H <input type="checkbox"/> MULTI-STORY HOUSE<br>I <input type="checkbox"/> MOBILE HOME<br>J <input type="checkbox"/> OTHER:   | 51. BUSINESS<br>A <input type="checkbox"/> APPLIANCE STORE<br>B <input type="checkbox"/> BANK/SAVINGS & LOAN<br>C <input type="checkbox"/> BAR<br>D <input type="checkbox"/> CAR/MOTORCYCLE SALES<br>E <input type="checkbox"/> COIN-OP MACHINE<br>F <input type="checkbox"/> CONSTRUCTION SITE<br>G <input type="checkbox"/> CONVENIENCE STORE<br>H <input type="checkbox"/> GAS STATION/GARAGE<br>I <input type="checkbox"/> GIFT/CANDY STORE<br>J <input type="checkbox"/> FENCED STORAGE | 61. MANUFACTURING CO<br>T <input type="checkbox"/> MEDICAL OFFICE<br>U <input type="checkbox"/> MOTEL/HOTEL<br>V <input type="checkbox"/> OFFICE BUILDING<br>W <input type="checkbox"/> PAYN/SHOP/SECONDHAND<br>X <input type="checkbox"/> RESTAURANT/FASTFOOD<br>Y <input type="checkbox"/> SPORTING GOODS/QUIN<br>Z <input type="checkbox"/> SUPERMARKET<br>BB <input type="checkbox"/> WAREHOUSE<br>CC <input type="checkbox"/> OTHER<br>DD <input type="checkbox"/> LAUNDROMAT/CLEANERS<br>RR <input type="checkbox"/> LIQUOR STORE   | 62. PUBLIC PREMISES<br>A <input type="checkbox"/> CHURCH<br>B <input type="checkbox"/> HOSPITAL<br>C <input type="checkbox"/> PARK/PLAYGROUND<br>D <input type="checkbox"/> PARKING LOT (COUNTY)<br>E <input type="checkbox"/> PARKING LOT (OTHER)<br>F <input type="checkbox"/> PUBLIC BUILDING<br>G <input type="checkbox"/> SCHOOL<br>H <input type="checkbox"/> SHOPPING MALL<br>I <input type="checkbox"/> STREET/HIGHWAY/ALLEY<br>J <input type="checkbox"/> OTHER | 63. OTHER<br>A <input type="checkbox"/> VEHICLE<br>B <input type="checkbox"/> CARPORT<br>C <input type="checkbox"/> OPEN SPACE<br>D <input type="checkbox"/> LOT/YARD<br>E <input type="checkbox"/> GROVE/ORCHARD/VINE ETC.<br>F <input type="checkbox"/> STORAGE BUILDING<br>G <input type="checkbox"/> UNKNOWN<br>H <input type="checkbox"/> OTHER   |   |   |  |  |  |
|   | 64. POINT OF ENTRY<br>A <input type="checkbox"/> UNKNOWN<br>B <input type="checkbox"/> FRONT<br>C <input type="checkbox"/> REAR<br>D <input type="checkbox"/> SIDE<br>E <input type="checkbox"/> GROUND LEVEL<br>F <input type="checkbox"/> UPPER LEVEL<br>G <input type="checkbox"/> DOOR<br>H <input type="checkbox"/> WINDOW<br>I <input type="checkbox"/> SLIDING GLASS<br>J <input type="checkbox"/> DUCT/VENT<br>K <input type="checkbox"/> ADJ. BLDG.<br>L <input type="checkbox"/> ROOF/FLOOR<br>M <input type="checkbox"/> WALL<br>N <input type="checkbox"/> GARAGE<br>O <input type="checkbox"/> BASEMENT<br>P <input type="checkbox"/> TRUNK/ENGINE<br>Q <input type="checkbox"/> OTHER: |  | 65. METHOD OF ENTRY<br>A <input type="checkbox"/> ATTEMPT ONLY<br>B <input type="checkbox"/> NO FORCE<br>C <input type="checkbox"/> KEY SUP<br>D <input type="checkbox"/> BODILY FORCE<br>E <input type="checkbox"/> SAW/DRILL<br>F <input type="checkbox"/> HIO IN BLDG.<br>G <input type="checkbox"/> PLIERS<br>H <input type="checkbox"/> PIPE WRENCH<br>I <input type="checkbox"/> TIRE IRON<br>J <input type="checkbox"/> UNK. PRY TOOL<br>K <input type="checkbox"/> BOLT CUTTERS<br>L <input type="checkbox"/> PUNCH<br>M <input type="checkbox"/> WINDOW SMASH<br>N <input type="checkbox"/> DOOR KICK<br>O <input type="checkbox"/> SCREWDRIVER<br>P <input type="checkbox"/> OTHER  |  | 66. OBJECT OF ATTACK<br>A <input type="checkbox"/> CASH REG./DRAWER<br>B <input type="checkbox"/> VICTIM/OWNER/EMPLOYEE<br>C <input type="checkbox"/> SAFE BOX<br>D <input type="checkbox"/> VENDING MACHINE<br>E <input type="checkbox"/> DISPLAY ITEMS<br>F <input type="checkbox"/> ATTIC<br>G <input type="checkbox"/> BEDROOM(S)<br>H <input type="checkbox"/> BATHROOM(S)<br>I <input type="checkbox"/> FAMILY ROOM/DEN<br>J <input type="checkbox"/> GARAGE/CARPORT<br>K <input type="checkbox"/> KITCHEN<br>L <input type="checkbox"/> LIVING ROOM<br>M <input type="checkbox"/> STORAGE AREA<br>N <input type="checkbox"/> PURSE/WALLET<br>O <input type="checkbox"/> CASH<br>P <input type="checkbox"/> OTHER: |   | 67. HOW ATTACKED PERSON<br>A <input type="checkbox"/> INFLECTS INJURY<br>B <input type="checkbox"/> FORCED VICTIM<br>C <input type="checkbox"/> THREAT OF RETAL<br>D <input type="checkbox"/> BOUND VICTIM<br>E <input type="checkbox"/> RIP/CUT CLOTHING<br>F <input type="checkbox"/> MOLESTED VICTIM<br>G <input type="checkbox"/> STRUCK VICTIM<br>H <input type="checkbox"/> DISROBED PARTIALLY<br>I <input type="checkbox"/> DISROBED FULLY<br>J <input type="checkbox"/> BLINDFOLDED VICTIM<br>K <input type="checkbox"/> MADE THREATS<br>L <input type="checkbox"/> FIRED WEAPON<br>M <input type="checkbox"/> SNATCHED PURSE<br>N <input type="checkbox"/> DEMANDED MONEY<br>O <input type="checkbox"/> PROPERTY<br>P <input type="checkbox"/> OTHER:  |  | 68. HOW ATTACKED PROPERTY<br>A <input type="checkbox"/> VANDALIZED<br>B <input type="checkbox"/> RANSACKED<br>C <input type="checkbox"/> MATCHES FOR LIGHT<br>D <input type="checkbox"/> ALARM DISABLED<br>E <input type="checkbox"/> KNEW LOCATION VALUABLES<br>F <input type="checkbox"/> SELECTIVE IN LOOT<br>G <input type="checkbox"/> VEHICLE NEEDED<br>H <input type="checkbox"/> UNOCCUPIED BLDG.<br>I <input type="checkbox"/> OCCUPIED BLDG.<br>J <input type="checkbox"/> PREPARED EXIT<br>K <input type="checkbox"/> USED LOOKOUT<br>L <input type="checkbox"/> SUSPECT ARMED<br>M <input type="checkbox"/> SHUT OFF POWER<br>N <input type="checkbox"/> STASHED LOOT<br>O <input type="checkbox"/> OTHER: |  |
| MODUS OPERANDI<br>□ ADDITIONAL INFORMATION IN NARRATIVE       | 69. PROPERTY ATTACKED<br>A <input type="checkbox"/> CURRENCY, NOTES, ETC.<br>B <input type="checkbox"/> JEWELRY, PRECIOUS METAL<br>C <input type="checkbox"/> CLOTHING & FURS<br>D <input type="checkbox"/> OFFICE EQUIPMENT<br>E <input type="checkbox"/> TELEVISION, RADIOS, VCR, STEREO, ETC.<br>F <input type="checkbox"/> FIREARMS<br>G <input type="checkbox"/> HOUSEHOLD GOODS<br>H <input type="checkbox"/> APPLIANCES, ETC.<br>I <input type="checkbox"/> CONSUMABLE GOODS<br>J <input type="checkbox"/> LIVESTOCK<br>K <input type="checkbox"/> OTHER:   |  | 70. METHOD OF DEPARTURE<br>A <input type="checkbox"/> VICTIM'S VEHICLE<br>B <input type="checkbox"/> AWAITING VEHICLE<br>C <input type="checkbox"/> NO PLATE ON VEHICLE<br>D <input type="checkbox"/> VEHICLE KNOWN<br>E <input type="checkbox"/> BICYCLE<br>F <input type="checkbox"/> MOTORCYCLE<br>G <input type="checkbox"/> MOPED<br>H <input type="checkbox"/> FOOT<br>I <input type="checkbox"/> UNKNOWN<br>J <input type="checkbox"/> OTHER:  |  | 71. WEAPON USED<br>A <input type="checkbox"/> HANDGUN<br>B <input type="checkbox"/> REVOLVER<br>C <input type="checkbox"/> SEMI-AUTO<br>D <input type="checkbox"/> BLUE<br>E <input type="checkbox"/> STEEL<br>F <input type="checkbox"/> NICKEL<br>G <input type="checkbox"/> 1-2 INCHES<br>H <input type="checkbox"/> 2 1/2 - 4 INCHES<br>I <input type="checkbox"/> 4 - 6 INCHES<br>J <input type="checkbox"/> LONGER THAN 6 INCHES<br>K <input type="checkbox"/> 36<br>L <input type="checkbox"/> 45<br>M <input type="checkbox"/> OTHER   |   | 72. USE OF WEAPON<br>A <input type="checkbox"/> LONG GUN<br>B <input type="checkbox"/> RIFLE<br>C <input type="checkbox"/> ASSAULT RIFLE<br>D <input type="checkbox"/> SHOTGUN<br>E <input type="checkbox"/> OTHER<br>F <input type="checkbox"/> HANDS/FEET<br>G <input type="checkbox"/> POCKET KNIFE<br>H <input type="checkbox"/> HUNTING KNIFE<br>I <input type="checkbox"/> BUTCHER KNIFE<br>J <input type="checkbox"/> TOY GUN<br>K <input type="checkbox"/> SIMULATED WEAPON<br>L <input type="checkbox"/> OTHER   |  | 73. SHOES<br>A <input type="checkbox"/> SUSPECT<br>B <input type="checkbox"/> LIGHT<br>C <input type="checkbox"/> DARK<br>D <input type="checkbox"/> DRESS<br>E <input type="checkbox"/> TENNIS<br>F <input type="checkbox"/> WORK BOOT<br>G <input type="checkbox"/> COWBOY<br>H <input type="checkbox"/> "COASTER"<br>I <input type="checkbox"/> OTHER   |  |
|   | 104. CAN VICTIM I.D. SUSPECT<br>[YES] [NO]   |  | 109. PHYS. CONDITION<br>SUSPECT<br>1<br>A <input type="checkbox"/> ACNE<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> FRECKLED<br>D <input type="checkbox"/> FAIR<br>E <input type="checkbox"/> MEDIUM<br>F <input type="checkbox"/> OLIVE<br>G <input type="checkbox"/> ACNE SCARS<br>H <input type="checkbox"/> RUDDY<br>I <input type="checkbox"/> TAN<br>J <input type="checkbox"/> FACIAL SCARS<br>K <input type="checkbox"/> FACIAL TATTOOS<br>L <input type="checkbox"/> TATTOOS/HAND<br>M <input type="checkbox"/> TATTOOS/F. ARMS<br>N <input type="checkbox"/> TATTOOS/SHLD.R<br>O <input type="checkbox"/> TATTOOS/BICEPS<br>P <input type="checkbox"/> TATTOOS/CHEST<br>Q <input type="checkbox"/> OTHER |  | 112. APPEARANCE<br>SUSPECT<br>1<br>A <input type="checkbox"/> DIRTY<br>B <input type="checkbox"/> FLASHY<br>C <input type="checkbox"/> ATTRACTIVE<br>D <input type="checkbox"/> MILITARY<br>E <input type="checkbox"/> UNKEMPT<br>F <input type="checkbox"/> ODOROUS<br>G <input type="checkbox"/> NEAT<br>H <input type="checkbox"/> CASUAL<br>I <input type="checkbox"/> GROOMED<br>J <input type="checkbox"/> OTHER   |   | 108. SPEECH<br>SUSPECT<br>1<br>A <input type="checkbox"/> LOUD<br>B <input type="checkbox"/> SOFT<br>C <input type="checkbox"/> MEDIUM<br>D <input type="checkbox"/> MONOTONE<br>E <input type="checkbox"/> HIGH PITCH<br>F <input type="checkbox"/> LOW PITCH<br>G <input type="checkbox"/> NASAL<br>H <input type="checkbox"/> ACCENT<br>I <input type="checkbox"/> LISP<br>J <input type="checkbox"/> STUTTER<br>K <input type="checkbox"/> RASPY<br>L <input type="checkbox"/> OFFENSIVE<br>M <input type="checkbox"/> NON-ENGLISH<br>N <input type="checkbox"/> PLEASANT<br>O <input type="checkbox"/> QUIET<br>P <input type="checkbox"/> MUMBLE<br>Q <input type="checkbox"/> TALKATIVE<br>R <input type="checkbox"/> DISGUISED<br>S <input type="checkbox"/> RAPID<br>T <input type="checkbox"/> SLOW<br>U <input type="checkbox"/> SLURRED |  | 115. PANTS<br>1<br>A <input type="checkbox"/> SUSPECT<br>B <input type="checkbox"/> LIGHT<br>C <input type="checkbox"/> DARK<br>D <input type="checkbox"/> DRESS<br>E <input type="checkbox"/> WORK<br>F <input type="checkbox"/> JEANS<br>G <input type="checkbox"/> OTHER  |  |
| VICTIM/WITNESS INFORMATION<br>□ ADDITIONAL NAMES IN NARRATIVE | 103. VICTIM/SUSPECT RELATIONSHIP<br>1<br>A <input type="checkbox"/> RELATIVE<br>B <input type="checkbox"/> SPOUSE<br>C <input type="checkbox"/> FRIEND<br>D <input type="checkbox"/> COLLEAGUE<br>E <input type="checkbox"/> CUSTOMER<br>F <input type="checkbox"/> NEIGHBOR<br>G <input type="checkbox"/> UNKNOWN   |  | 105. DEMEANOR<br>SUSPECT<br>1<br>A <input type="checkbox"/> ANGRY<br>B <input type="checkbox"/> CALM<br>C <input type="checkbox"/> NERVOUS<br>D <input type="checkbox"/> IRRATIONAL<br>E <input type="checkbox"/> EXPERT<br>F <input type="checkbox"/> VIOLENT<br>G <input type="checkbox"/> REGRETFUL<br>H <input type="checkbox"/> POLITE<br>I <input type="checkbox"/> DRUNK<br>J <input type="checkbox"/> STUPOROUS<br>K <input type="checkbox"/> UNKNOWN<br>L <input type="checkbox"/> OTHER   |  | 111. FACIAL HAIR<br>SUSPECT<br>1<br>A <input type="checkbox"/> CLEAN<br>B <input type="checkbox"/> MUSTACHE<br>C <input type="checkbox"/> FU MANOHU<br>D <input type="checkbox"/> GOATEE<br>E <input type="checkbox"/> UNSHAVEN<br>F <input type="checkbox"/> BEARD NEAT<br>G <input type="checkbox"/> BEARD WILD<br>H <input type="checkbox"/> SIDE BURN<br>I <input type="checkbox"/> LOWER LIP<br>J <input type="checkbox"/> UNKNOWN  |   | 114. SHIRT<br>SUSPECT<br>1<br>A <input type="checkbox"/> LIGHT<br>B <input type="checkbox"/> DARK<br>C <input type="checkbox"/> DRESS<br>D <input type="checkbox"/> T-SHIRT<br>E <input type="checkbox"/> OTHER   |  | 117. TEETH<br>SUSPECT<br>1<br>A <input type="checkbox"/> CROOKED<br>B <input type="checkbox"/> BRACES<br>C <input type="checkbox"/> DECAYED<br>D <input type="checkbox"/> MISSING<br>E <input type="checkbox"/> GOLD CAPS  |  |
|   | 106. MASK<br>SUSPECT<br>1<br>A <input type="checkbox"/> SKI MASK<br>B <input type="checkbox"/> ROSHRY<br>C <input type="checkbox"/> HALLOWEEN<br>D <input type="checkbox"/> OTHER  |  | 107. GLASSES<br>SUSPECT<br>1<br>A <input type="checkbox"/> SUNGLASSES<br>B <input type="checkbox"/> WIRE FRAME<br>C <input type="checkbox"/> PLASTIC<br>D <input type="checkbox"/> UNKNOWN  |  | 118. HAND USE<br>SUSPECT<br>1<br>A <input type="checkbox"/> UNKNOWN<br>B <input type="checkbox"/> RIGHT<br>C <input type="checkbox"/> LEFT   |   | 119. BUILD<br>SUSPECT<br>1<br>A <input type="checkbox"/> TALL<br>B <input type="checkbox"/> SHORT<br>C <input type="checkbox"/> THIN<br>D <input type="checkbox"/> HEAVY SET<br>E <input type="checkbox"/> UNKNOWN  |  |  |  |
| SE THIS SPACE TO EXPLAIN ANY OF THE ABOVE                     |  |  |   |  |  |   |   |  |  |  |

REPORTING DEPUTY

DATE/TIME

REVIEWED BY:

DATE

# TULARE COUNTY SHERIFF'S DEPARTMENT

Paid

☒ CRIME REPORT

☐ INCIDENT REPORT

☐ WARRANT

SEP 21 2005

CASE NUMBER

04-17649

STATISTICAL CATEGORY

☐ AG CRIME ☐ NARCOTICS ☐ GANG ☐ HATE CRIME ☐ DOMESTIC ☐ JUVENILE ☒ CORRECTIONS

SECTION

P.C. 647(F) / 849(B)

DEFINITION

PUBLIC INTOX. - DETENTION

Tulare County Tax Collector  
Deputy

RES ONLY / MSD

TYPE

8320

LOCATION OF OCCURRENCE

807 S. MEALE, LINDSAY

BEAT

20 A

PROPERTY LOSS & PROPERTY DAMAGE

DATE OCC.

FROM TO:

11-07-04

TIME OCC.

FROM TO:

0200

DAY OCC.

SUN

DATE / TIME DISP

11-07-04 / 0200

TIME ARR

0200

TIME COMP

0245

V  
I  
C  
T  
I  
M

CODE

NAME (LAST, FIRST MIDDLE)

FIRM IF BUSINESS

V-1

STATE OF CALIFORNIA

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

CODE

NAME (LAST, FIRST MIDDLE)

FIRM IF BUSINESS

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

S  
U  
S  
P  
E  
C  
T

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

S-1

[REDACTED]

-

M

14

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

S-1

[REDACTED]

UNK

849(B)

ADDRESS / POSSIBLE LOCATION

RESIDENCE PHONE

HOMELESS IN LINDSAY

NONE

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

ADDRESS / POSSIBLE LOCATION

RESIDENCE PHONE

[REDACTED]

[REDACTED]

V  
E  
H  
I  
C  
L  
E

VIC [ ]

SUS. [ ]

YEAR

MAKE

MODEL

COLOR

STYLE

LICENSE

STATE

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

NAME OF R/O

VIC - SUS

ADDRESS OF R/O

VIC - SUS

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

OTHER VEHICLE INFORMATION

[REDACTED]

ODOR OF

ALCOHOL

YES NO

ABLE TO CARE

FOR SELF

YES NO

SPEECH

[ ] NORMAL

[X] SLURRED

[ ] INCOHERENT

CLOTHING

[ ] NORMAL

[X] SOILED

[ ] DISARRANGED

BALANCE

[ ] GOOD

[X] POOR

[ ] UNSTEADY

ATTITUDE

[X] COOPERATIVE

[ ] ANTAGONISTIC

[ ] ANGRY

NARRATIVE

- REFER TO NARRATIVE -

ENTERED  
11/8/04

VICTIM OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☐ NO

CASE STATUS:

[ ] ACTIVE

[ ] INACTIVE

[X] CLOSED

[ ] UNFOUNDED

NON-PROS Y-6

NEWS REL Y-6

[X] N

COPIES TO:

DET

PAT

D/A

JUV

CPS

OTHER

SUP-RESP

Y-6

LAB-RESP

Y-6

REPORTING OFFICER

P. HERRERA

I.D. #

149062

DATE/TIME

11-07-04/0200

REVIEWED BY

[REDACTED]

DATE

11-8-04

# TULARE COUNTY SHERIFF'S DEPARTMENT

[X] CRIME REPORT

[ ] INCIDENT REPORT

SEP 21 2005

CASE NUMBER

04-11116

STATISTICAL CATEGORY

☐ AG CRIME ☐ NARCOTICS ☐ GANG ☐ HATE CRIME ☐ DOMESTIC ☒ GENERAL FIELD ☐ CORRECTIONS

SECTION

PC 647(F)

DEFINITION

PUBLIC INTOXICATION

Tulare County Tax Collector  
By Deputy

FELONY/MISD

TYPE

8320

LOCATION OF OCCURRENCE

807 S. MIRAGE

BEAT

20A / LINDSAY

PROPERTY LOSS & PROPERTY DAMAGE

N/A

DATE OCC. FROM TO: 7-17-04

TIME OCC. FROM TO: 0220

DAY OCC. SATURDAY

DATE / TIME DISP. 7-17-04 / 0223

TIME ARR 0226

TIME COMP 0300

VICTIM

CODE

V-1

NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS

STATE OF CALIFORNIA

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

CODE

NAME (LAST, FIRST MIDDLE) FIRM IF BUSINESS

DATE OF BIRTH

SEX

RACE

RESIDENCE ADDRESS

OCCUPATION/BUS ADDRESS

RESIDENCE PHONE

SUSPECT

CODE

S-1

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR

CITE

ADDRESS / POSSIBLE LOCATION

19238 ORANGEBELT / STRATHMORE

RESIDENCE PHONE

CODE

NAME (LAST, FIRST MIDDLE)

AKA'S

SEX

RACE

HGT.

WGT.

EYES

HAIR

HAIR STYLE

DATE OF BIRTH

DL / SS NUMBER

ARR / CITE

ADDRESS / POSSIBLE LOCATION

RESIDENCE PHONE

VEHICLE

VIC [ ]

SUS. [ ]

YEAR

MAKE

MODEL

COLOR

STYLE

LICENSE

STATE

NAME OF R/O

VIC - SUS

ADDRESS OF R/O

VIC - SUS

OTHER VEHICLE INFORMATION

ODOR OF ALCOHOL  
☒ YES ☐ NO

ABLE TO CARE FOR SELF  
☐ YES ☒ NO

SPEECH  
☐ NORMAL  
☒ SLURRED  
☐ INCOHERENT

CLOTHING  
☒ NORMAL  
☐ SOILED  
☐ DISARRANGED

BALANCE  
☐ GOOD  
☐ POOR  
☒ UNSTEADY

ATTITUDE  
☐ COOPERATIVE  
☐ ANTAGONISTIC  
☐ ANGRY

NARRATIVE

VICTIM OF VIOLENT CRIME NOTIFICATION MADE? ☐ YES ☐ NO

CASE STATUS ☒ ACTIVE ☐ INACTIVE ☐ CLOSED ☐ UNFOUNDED

NON-PROS Y ☒ N

NEWS REL Y ☒ N COPIES TO: DET PAT ☒ DIA JUV OPS OTHER

SUP-RESP ☒ Y ☐ N

LAB-RESP ☒ Y ☐ N

DET-RESP ☒ Y ☐ N

REPORTING OFFICER

G. MERRILL

I.D. #

M3825

DATE/TIME

7-17-04 / 0415

REVIEWED BY:

SKELLEY

DATE

07-17-04

Paid

Ck # Amt \$

SEP 21 2005

O Gerald Fields  
Tulare County Tax Collector  
By Deputy

| Line | Account | Amount | Code  | Description | Code  | Description | Status | Info        |
|------|---------|--------|-------|-------------|-------|-------------|--------|-------------|
| 03   | 051604  | 0120   | 00807 | S MIRAGE    | AV LI | BAR.CHK     | 20A2   | Closed      |
| 04   | 052804  | 2215   | 00807 | S MIRAGE    | AV LI | BAR.CHK     | 20A2   | Closed      |
| 05   | 071504  | 1128   | 00807 | S MIRAGE    | AV LI | INFO        |        | Closed      |
| 06   | 071704  | 0226   | 00807 | S MIRAGE    | AV LI | 647F        | 203    | 04-00011116 |
| 07   | 100204  | 2219   | 00807 | S MIRAGE    | AV LI | INCIDENT    | 20A2   | 04-00015685 |
| 08   | 100204  | 2309   | 00807 | S MIRAGE    | AV LI | PCO         | 20A2   | Closed      |
| 09   | 100904  | 2341   | 00807 | S MIRAGE    | AV LI | 415.IP      | 672    | Closed      |
| 10   | 102704  | 2057   | 00807 | S MIRAGE    | AV LI | 23152       | 303    | Closed      |
| 11   | 110704  | 0141   | 00807 | S MIRAGE    | AV LI | BAR.CHK     | 20A2   | 04-00017649 |
| 12   | 111104  | 0057   | 00807 | S MIRAGE    | AV LI | PCO         | 203    | Closed      |
| 13   | 111304  | 2325   | 00807 | S MIRAGE    | AV LI | 245.JO      | 20A2   | 04-00018021 |
| 14   | 112104  | 2106   | 00807 | S MIRAGE    | AV LI | 242         | 20A2   | 04-00018492 |
| 15   | 120404  | 0152   | 00807 | S MIRAGE    | AV LI | SUS.CIR     | 20A2   | Closed      |

-- Enter Line No. 01-15 or Request (P=Previous Page, N=Next Page, Q=Quit):  
OUT INFO

1 647 - 11116

4 Fights

1 call of strippers  
15685

1 drunk driver in AREA

the rest of calls were misc calls.

including Vandalism  
state outs  
WARRANT service, Bar checks

CAD  
CALLS

DEJA VU INSTALLED.  
Version 7.10a/32  
By Robert E. Brose II.  
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Registered to Automation of Tulare County Sheriff Department

telnet (tcs01)

( F1 F2 F3 ) (Sheriff) C L O S E D I N C I D E N T D I S P L A Y ( M2 M1 M0  
Presentation ...: (L=Low to high, H=High to low)  
Display Selctd : AD (Date/Time=DT Address=AD Equip=EQ Inc-Type=IT RptNo=R#/S#

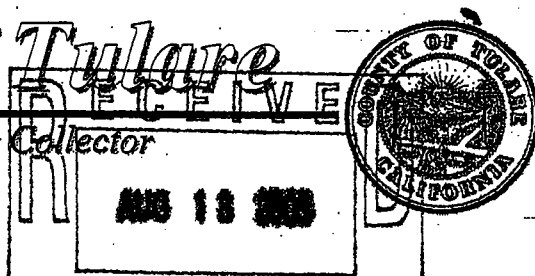
| Ln | Date   | Time | Dispatch | Address | Inc-Type      | Equip | Rprt-Number |
|----|--------|------|----------|---------|---------------|-------|-------------|
| 01 | 030705 | 2051 | 00807 S  | MIRAGE  | AV LI BAR.CHK | 20A2  | Closed      |
| 02 | 042905 | 2147 | 00807 S  | MIRAGE  | AV LI OUT     | 1531  | Closed      |

|               |                   |                 |                  |              |                   |                          |                 |                   |              |
|---------------|-------------------|-----------------|------------------|--------------|-------------------|--------------------------|-----------------|-------------------|--------------|
| 03            | 043005            | 0101            | 00807            | S            | MIRAGE            | AV LI BAR.CHK            | 20A2            | Closed            | S            |
| 04            | 050705            | 2132            | 00807            | S            | MIRAGE            | AV LI CODE.5             | 1531            | Closed            | S            |
| 05            | 051405            | 2155            | 00807            | S            | MIRAGE            | AV LI WS                 | 1531            | Closed            | S            |
| 06            | 051705            | 2316            | 00807            | S            | MIRAGE            | AV LI 10-21              |                 | Closed            | S            |
| 07            | 052305            | 0039            | 00807            | S            | MIRAGE            | AV LI JUV.PROB           | 20A2            | Closed            | S            |
| 08            | 072305            | 0138            | 00807            | S            | MIRAGE            | AV LI 594                | 20A2            | Closed            | S            |
| 09            | 080705            | 0033            | 00807            | S            | MIRAGE            | AV LI 415 JO             | 20A2            | Closed            | S            |
| <del>10</del> | <del>051004</del> | <del>1704</del> | <del>00825</del> | <del>S</del> | <del>MIRAGE</del> | <del>AV LI SUS.CIR</del> | <del>20A2</del> | <del>Closed</del> | <del>S</del> |
| 11            | 091204            | 0307            | 00825            | S            | MIRAGE            | AV LI BAR.CHK            | 20A2            | Closed            | S            |
| 12            | 112504            | 2309            | 00825            | S            | MIRAGE            | AV LI 911                | 20A2            | Closed            | S            |
| 13            | 120304            | 1147            | 00825            | S            | MIRAGE            | AV LI SHOTS              | 20C1            | Closed            | S            |
| 14            | 011505            | 2119            | 00825            | S            | MIRAGE            | AV LI TS                 | 672             | Closed            | S            |
| 15            | 102604            | 1432            | 00878            | S            | MIRAGE            | AV LI SUS.CIR            | 20A1            | Closed            | S            |

-- Enter Line No. 01-15 or Request (P=Previous Page, N=Next Page, Q=Quit):  
OUT INFO

# County of Tulare

Office of the Treasurer/Tax Collector



O. Gerald Fields  
Treasurer/Tax Collector

William F. Shearer, Jr., C.P.A.  
Assistant Treasurer/Tax Collector

## Application for Public Dance/Dance Hall License

DATE: JULY 21, 2005 APN: 208-030-010-000

NAME OF APPLICANT: Marilu Lopez

NAME OF BUSINESS: El Campesino

### Report from Tulare County Sheriff:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Sheriff's Department Investigating Officer

### Report from Tulare Resource Management Agency (Planning Dept):

Date: 8/15/05

Approval: PSP-02-001

Denial: Non-Compliance # Non-legal expansion of use to include exotic dancers with conditions of use permit.

Special Conditions: \_\_\_\_\_

Reason for Denial: Compliance Review for Special Use Permit attached. PSP 02-001 Conditions of approval No. 12, 13, 14, 15, 20 + 27 not complied with.

By: Deborah Kruse

Resource Management Agency Investigating Officer

### Report from Tulare County Health & Human Services Agency (Environmental Health):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Health & Human Services Agency Investigating Officer

### Report from Tulare County Fire Warden:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Fire Warden Investigating Officer



BEFORE THE PLANNING COMMISSION

COUNTY OF TULARE, STATE OF CALIFORNIA

IN THE MATTER OF SPECIAL USE PERMIT )

RESOLUTION NO. 8011

APPLICATION NO. PSP 02-001 )

Resolution of the Planning Commission of the County of Tulare approving a Special Use Permit requested by Marilu Lopez, 878 W. Mariposa St., Lindsay, CA 93247 an amendment to Special Use Permit No. PSP 92-108 (ZA) to allow the addition of live entertainment and dancing and to allow a change in the Alcoholic Beverage Control license to include "distilled spirits" (along with beer and wine in an existing bar) on a 16,712 sq. ft. parcel in the C-2 (General Commercial) Zone, on property located at 807 S. Mirage Avenue, on the west side of Mirage Avenue (D 242 – Orange Belt Drive/Old Highway 65), approximately 650' south of Lindmore Street (Avenue 224), south of the City of Lindsay.

WHEREAS, an application has been filed pursuant to the regulations contained in Section 16 of Ordinance No. 352, the Zoning Ordinance, and

WHEREAS, the Planning Commission has given notice of its intention to consider the granting of a Special Use Permit as provided in Section 18 of said Ordinance No. 352 and as provided in Section 65905 of the Government Code of the State of California, and

WHEREAS, Staff has performed necessary investigations, prepared a written report, and recommended approval of this application subject to conditions, and

WHEREAS, a public hearing was held and an opportunity for public testimony was provided at a regular meeting of the Planning Commission on July 23, 2003, and

WHEREAS, at that meeting of the Planning Commission public testimony was received and recorded from Marilu Lopez, Applicant (through translator, Frances Hernandez, RMA staff) in support of the proposal and no one spoke in opposition to the proposal.

NOW, THEREFORE, BE IT RESOLVED as follows:

A. This Planning Commission hereby certifies that it has reviewed and considered the information contained in the Negative Declaration for the proposed project together with any comments received during the public review process, in compliance with the California Environmental Quality Act and the State Guidelines for the Implementation of the California Environmental Quality Act of 1970 prior to taking action on the project.

B. This Planning Commission hereby adopts the following findings of fact as to the reasons for approval of this application:

1. The applicant has requested an amendment to Special Use Permit No. PSP 92-108 (ZA) to allow the addition of live entertainment and dancing and to allow a change in the Alcoholic Beverage Control (ABC) license to include "distilled spirits" (along with beer and wine in an existing bar) on a 16,712 sq. ft. parcel in the C-2 (General Commercial) Zone located at 807 S. Mirage Avenue, on the west side of Mirage Avenue (D. 242 - Orange Belt Drive/Old Highway 65), approximately 650' south of Lindmore Street (Avenue 224), south of the City of Lindsay.
2. The site is zoned C-2 and contains an existing bar with parking. The facility also has an ABC license to sell beer and wine only, for on-site consumption. The site also includes a small recycling center (permitted by PSP 96-005). The property immediately north of the site is zoned C-2 and contains orange orchards up to Lindmore Street (Avenue 224). The Lindsay City limit is located at Lindmore Street; City zoning is MX (Mixed Use); and is developed primarily with warehouse and service commercial uses. To the east, the property is zoned A-1 (Agricultural) and orange orchards cover from Lindmore Street to more than 1,000 feet south of the southerly site property line. To the west, the property is zoned C-2 and has a single family dwelling on it. Further west is the S.P.R.R. right-of-way and west of that are parcels zoned A-1 containing orange orchards. Surrounding the parcel to the south and west is another parcel zoned C-2 with a single family residence on it. Immediately south of that parcel is another parcel zoned C-2. The parcel contains a similar type of establishment (restaurant) providing food, alcoholic beverages and dancing (PSP 95-020). Farther to the south, the zoning is A-1 and the parcel contains orange orchards.
3. Section 16 of the County Zoning Ordinance No. 352, as amended, states that the following uses may be permitted in the C-2 Zone upon approval of a Special Use Permit: "Cabaret, night club, dancing or entertainment in a bar, café or restaurant" and "Alcoholic beverages, sale of under an on-site license".
4. The County-adopted 1981 Lindsay Land Use and Circulation Plan designates the site as "Service Commercial". Mirage is designated as an arterial. The subject site is within the County-adopted Urban Improvement Area Boundary and Urban Area Boundary for the Lindsay area. The Open Space Plan designates the site as "Urban Expansion".
5. The proposed use is a permitted special use in the C-2 Zone and is compatible with the Land Use Element, Urban Area Boundaries Element and the Open Space Plan as set forth in Finding No. 4. Based on this information, the proposed permit application and requested Special Use Permit are in compliance with the County's General Plan.

6. According to the Tulare County Fire Department, the maximum occupancy load for the facility is 49. At the ratio of one space for each three seats, according to the Tulare County Planning Commission Development Standards, 18 on-site parking spaces are recommended. The Site Plan demonstrates room for a total of 19 off-street spaces.
7. This facility has existed at this location in excess of thirty (30) years. Special Use Permit PSP 92-108 (ZA) to allow sale of alcoholic beverage (beer and wine only) under an on-sale license in the existing card room building was approved by the Zoning Administrator on January 3, 1993. The Tulare County Zoning Administrator is authorized to approve or deny Special Use Permits to allow the sale of beer and wine only under an on-sale license. The addition of distilled spirits or hard liquor, must be authorized by the Planning Commission. The applicant requests an amendment to their existing Special Use Permit (PSP 92-108 (ZA); Decision 1555) to revise Finding No. 6 and eliminate Condition No. 7 and to allow sale of all alcoholic beverages under an on-sale license and allow live entertainment and dancing in the bar.
8. A violation investigation, Case No. V695-043, was opened on December 5, 1995, when it was determined that a use permit was required for the recycling center that had already been established, and that the bar/card room was not in compliance with some of the conditions of PSP 92-108 (ZA). PSP 96-005 granted June 10, 1998, by Zoning Administrator Decision #7690 authorized the recycling use. However, the remaining issues of V695-043 are still open pending the results of this use permit application.
9. The applicant is also proposing to construct a small stage or bandstand and dance floor as shown on Exhibit "A" (site plan map sheet 2 of 2). Any live entertainment or dancing allowed on-site will be conditioned to be subject to any policy or ordinance or future policy or ordinance limiting types of live entertainment and dancing allowed.
10. Business hours are proposed to be Monday through Friday – 5:00 pm to 2:00 am; Saturday and Sunday – 10:00 am to 2:00 pm., twelve months a year. Hours of operation have increased since 1993, when they were required to be 4:00 pm to 2:00 am; Monday through Saturday. The recycling operation is required to be closed by 5:00 pm every day. The recycling business is very small and consists of a portable shade structure, scale, chair and several trash cans. The overlap of hours of operation on Saturday and Sunday by the recycling facility and bar should not cause a problem in regards to traffic and parking because of the very small scale of the recycling business and the limitations of occupancy imposed by the Fire Department

11. The applicant claims to have four (4) employees, an increase from two in PSP 92-108 (ZA), and an average of one (1) service delivery per day. Applicant estimates total customer count per day at 100 persons. Prior use permit PSP 92-108 indicates the facility contains 49 seats. No change in seating capacity has been proposed by the current applicant as that is the maximum occupancy allowed by the Tulare County Fire Department (see condition of approval #21) and no increase in capacity beyond 49 is approved or allowed.
12. Comments received from the Tulare County Association of Governments (TCAG) dated May 9, 2002, indicate a traffic study be required to analyze impacts from the proposed project on adjacent highways, streets and roads, as well as ingress and egress to and from the site and parking lot circulation and configuration. The addition of live entertainment and dancing in an existing bar should not have any additional impacts on adjacent highways, streets and roads as the maximum capacity of the facility remains at 49. A condition of approval has been included that requires "enter only" and "exit only" signs to be posted at the existing driveways to assure proper circulation of the parking area.
13. The Environmental Assessment Officer has approved a Negative Declaration for public review for the project, indicating that the project will not have any significant environmental impacts.

C. This Planning Commission, after considering all of the evidence presented, found that the establishment, maintenance, and operation of the use of building or land applied for PSP 02-001 would not, under the circumstances of the particular case, be detrimental to the health, safety, and general welfare of persons residing or working in the neighborhood or to the general welfare of the County.

AND, BE IT FURTHER RESOLVED as follows:

A. This Planning Commission hereby finds there is no substantial evidence that said Special Use Permit will have a significant effect on the environment and determines that the Negative Declaration for said Special Use Permit reflects the independent judgment of the County and has been completed in compliance with the California Environmental Quality Act and the State Guidelines for the Implementation of the California Environmental Quality Act of 1970.

B. This Planning Commission hereby approves Special Use Permit Application No. PSP 02-001. The following conditions shall apply to the entire site and shall supersede the Conditions of Approval contained in Special Use Permit No. PSP 92-108 (ZA) (ZA Decision No. 1555) and Special Use Permit No. PSP 96-005 (Planning Commission Resolution No. 7690):

1. The applicant shall make all necessary arrangements for the relocation of all overhead and underground public utility facilities that interfere with any improvement work to be performed by the applicant. The applicant shall also

make necessary arrangements with the public utility company affected for the cost of relocating such facilities and no portion of the relocation cost will be paid by the County.

2. No portion of the property covered by this application shall be sold or used for purposes other than those expressly permitted under this use permit unless an amendment to the use permit is approved by the County. This shall not restrict the sale of the entire parcel of property as a unit subject to all of the conditions required herein.
3. All on site parking areas and driveways shall be surfaced for all-weather conditions and be maintained so that dust and mud do not create conditions detrimental to surrounding roadways, drainage and water ways.
4. The existing wheel stops located at the front of the building shall be removed and "No Parking" signs shall be posted within 30 days of approval of this Special Use Permit on the front of the building to prohibit parking in that location.
5. ~~A solid wall or fence shall be maintained around the perimeter of the recycling~~ center. Stored materials shall not be visible from adjacent properties above the top of the fence or storage bins. The wall or fence shall not be more than 8 feet in height.
6. Any sign (as defined in the Planning Commission Development Standards) in connection with the recycling center shall be located on the subject site and outside of the public right of way and shall be subject to review and approval of the Assistant Director, RMA Current Planning prior to installation.
7. The recycling center shall close no later than 5:00 p.m. and the bar/dance hall shall operate Monday through Friday, 5:00 p.m. to 2:00 a.m. and Saturday and Sunday, 10:00 a.m. to 2:00 a.m.
8. Toilet facilities shall be available on the premises to employees of the recycling operation during all hours of operation. This may be provided by assured access to facilities within the bar or a portable toilet located as to not be visible from outside the property. Toilet facilities may also be provided by other means subject to prior review and approval of the Assistant Director RMA, Current Planning.
9. No crushing of collected materials or other processing is allowed on-site.
10. No waste food or tires shall be accepted from customers. Only aluminum, plastic and glass containers and non-ferrous metal may be accepted. No batteries shall be accepted.

11. No more than a total of four (4) roll-off bins, trailers or other material containers used for collection shall be on-site at any one time. The maximum capacity of each collection container shall be 35 cubic yards. Containers shall be brought on-site clean and free of rubbish and shall be emptied or removed from the site weekly.
12. An approved method for providing a reliable water source for fire fighting purposes shall be provided. The Tulare County Fire Department shall review the system prior to installation.
13. The applicant shall provide portable fire extinguishers per NFPA Pamphlet #10.
14. Exiting shall comply with Article 12 of the Uniform Fire Code and Chapter 10 of the Uniform Building Code.
15. The applicant shall contact the Tulare County Fire Department for a final inspection of the facility prior to issuance of a dance hall license from the Tulare County Tax Collector.
16. The applicant shall obtain and maintain a Dance Hall License from the Tulare County Tax Collector prior to any dancing at the facility.
17. The applicant shall obtain and maintain the appropriate license from the Department of Alcoholic Beverage Control consistent with this approval.
18. The property owner shall sign and file a Right to Farm Notice with the Tulare County Recorder's Office (Attachment No. 2).
19. A grading and drainage plan shall be prepared by a Civil Engineer and shall be submitted to the Tulare County Resource Management Agency and Flood Control Engineer for approval prior to any new construction. This plan shall include existing and proposed contours and detail the means of disposal of storm water runoff from the site in such a manner that all such runoff shall be collected and disposed of on-site. The Plan shall specify a means of disposal such that runoff is not diverted to adjacent property or road frontage.  
  
A letter of certification from a Registered Civil Engineer that confirms construction was completed according to the plans approved by the Resource Management Agency shall be provided to the Code Compliance Coordinator prior to issuance of the final occupancy permits.
20. Signs shall be posted at the existing driveways indicating, "enter only" at the north driveway, and "exit only" at the south driveway to assure only one-way proper circulation through the parking area.

21. The property owner shall install a traffic barrier acceptable to Tulare County RMA across the frontage of Mirage Drive designed so that vehicle traffic is forced to utilize the drive approaches for ingress and egress as shown on the approved site plan. Unless an encroachment permit is approved by the RMA Engineering Division, the barrier shall be located outside the public right of way.
22. The noise level (in decibels) of the project shall not exceed 70dB at the property line during the hours of 7:00 a.m. to 10:00 p.m. and shall not exceed 65dB at the property line between the hours of 10:00 p.m. and 7:00 a.m.
23. Maximum occupancy of the facility shall be limited to 49 persons per the Tulare County Fire Department.
24. A minimum of 18 on-site parking spaces shall be provided and properly maintained.
25. Building permits including engineering data, if necessary, shall be required for any new building additions, alterations or changes of occupancy of existing structures on the site.
26. The building and premises shall be maintained in a good, clean and orderly manner, free of any condition that presents a health or fire hazard or a condition which would add or contribute to the rapid spread of fire; particular attention shall be directed to excessive amount of dry weeds and debris around property and equipment on site.
27. The parking lot shall be well lighted for improved circulation in the evening and provide added security subject to Condition of Approval #3 of Standard Conditions of Approval (attached).
28. The permitted activity shall be subject to any current or future codes, ordinances, or policies of the County regarding the types of entertainment and/or dancing allowed in permitted facilities.
29. Standardized conditions as set forth in Planning Commission Resolution No. 5976 as amended by Resolution Nos. 6013, 6334 and 6702 shall apply to this application (see Attachment No. 1).

The foregoing resolution was adopted upon motion of Commissioner Fernandes, seconded by Commissioner Kirkpatrick, at a regular meeting of the Planning Commission on the 23<sup>rd</sup> day of July, 2003, by the following roll call vote:

AYES: Kapheim, Wheeler, Kirkpatrick, Dias, Fernandes

NOES: Whitlatch

ABSTAIN: None

ABSENT: Millwee

TULARE COUNTY PLANNING COMMISSION

*Mary E. Beattie*  
for George E. Finney, Secretary

BC:ke



# Attachment No. 1

## STANDARD CONDITIONS OF APPROVAL FOR SPECIAL USE PERMITS

(Planning Commission Resolution No. 5976 as amended by 6013, 6334 and 6702)

1. Development shall be in accordance with the plan(s) as submitted by the applicant and/or as modified by the Planning Commission (P.C. Exhibit "A") and with the Site Plan Development Standards pertaining to a use of this type adopted by the Planning Commission on February 20, 1970.
2. Regardless of Condition No. 1 above, the Planning and Development Director is authorized to approve minor modifications in the approved plans upon a request by the applicant, or his successors, as long as said modifications do not materially affect the determination of the Planning Commission. Such modification shall be noted on the approved plans and shall be initialed by the Planning and Development Director.
3. All exterior lighting shall be so adjusted as to deflect direct rays away from public roadways and adjacent properties.
4. The proposed facility shall be maintained and operated in accordance with all State and County health regulations.
5. Any structures built shall conform to the building regulations and the building line setbacks of the Ordinance Code of Tulare County insofar as said regulations and setbacks are applicable to such structures.
6. If there are conditions set down herein which require construction of improvements, they shall be complied with before the premises shall be used for the purposes applied for, in order that the safety and general welfare of the persons using said premises, and the traveling public, shall be protected. The Planning Commission may grant exceptions to this condition upon request by the applicant.
7. This use permit shall automatically be null and void two (2) years after the date upon which it is granted by the Planning Commission, unless the applicant, or his successor, has actually commenced the use authorized by the permit within said two year period. The Planning Commission may grant one or more extensions of said two year time, upon request by the applicant.
8. This use permit will not be effective until ten (10) days after the date upon which it is granted by the Planning Commission and until the applicant, at his own expense, has executed and filed with the County Recorder, a certified copy of the resolution of the Planning Commission granting said permit with a duly authorized acceptance, in the form approved by the County Counsel, endorsed thereon.
9. All standard conditions and all special conditions of approval of this Special Use Permit must be complied with at all times in order to continue the use or uses allowed. Compliance with such conditions is subject to review at any time. Unless a sooner review is required, an initial review of compliance shall be conducted by the Tulare County Planning Commission twelve months after the granting of the Special Use Permit. Additional reviews may be undertaken at the discretion of the Planning Commission.
10. This Special Use Permit shall automatically expire and become null and void two (2) years after the use for which it was granted is discontinued or abandoned. However, upon application by the applicant, or his/her successor, the Planning Commission may extend the expiration date in accordance with the procedures set forth in the Zoning Ordinance.



# RESOURCE MANAGEMENT AGENCY

5961 SOUTH MOONEY BLVD.  
VISALIA, CA. 93277  
PHONE (559) 733-6291  
FAX (559) 730-2653

|                 |                         |
|-----------------|-------------------------|
| Britt L. Fussel | Engineering             |
| Deborah Kruse   | Development Services    |
| Jean P. Brou    | Transportation          |
| George Finney   | Long Range Planning     |
| Deborah West    | Support Services        |
| Roger Hunt      | Administrative Services |

HENRY HASH, DIRECTOR

THOMAS W. SHERRY, ASSOCIATE DIRECTOR

TO: Planning Commission

FROM: Lissa Davis, Code Compliance Manager

DATE: August 10, 2005

SUBJECT: 24 Month Compliance Review for Special Use Permit PSP 02-001

Applicant: Marilu Lopez  
878 West Mariposa Street  
Lindsay, CA 93247

## Project Description:

Special Use Permit to allow the addition of live entertainment and dancing and to allow a change of alcoholic beverage control license to include distilled spirits along with beer and wine in an existing bar on a 16,712 sq. ft. parcel in the C-2 (General Commercial) Zone on property located on the west side of Mirage Avenue, approximately 650 feet south of Lindmore Street, south of the City of Lindsay.

## Project Update:

The Planning Commission approved this project on July 23, 2003, by Resolution No. 8011. The resolution and acceptance forms have been recorded. Compliance reporting and monitoring fees have been paid.

Ms. Lopez has obtained a dancehall license through the Tax Collector's Office, but has expanded beyond the intent of the license to include exotic dancers. The property owner stated that she thought it was covered under her dance hall license.

Conditions of approval No. 12, 13, 14, 15, 20, and 27 have not been complied with. Conditions No. 12 through 15 were recommended by the Fire Department, Condition No. 20 requires that signs shall be posted at the existing driveways indicating "enter only" at the north driveway and "exit only" at the south driveway to assure only one-way proper circulation through the parking area. Condition No. 27 requires that the parking lot be well lighted for improved circulation in the evening and provide added security subject to Condition of Approval No. 3 of Standard Conditions of Approval (attached).

## Recommendation:

Staff recommends that the Planning Commission review this project in 12 months.

TO: LISSA DAVIS RMA From: DAVE WILLIAMS  
TJSD

**NEWS ITEM****TULARE COUNTY SHERIFF'S OFFICE**

CRIME: 11378/11377/11364 AREA: Lindsay DATE/TIME REC'D: 05-14-05/2400  
HS, 647(b)/647fPC

CASE #: 05-60088 LOSS: N/A DATE/TIME OCC'D: 4-29-05, 05-07-05 and 05-14-05

VICTIM: State of California

ADDRESS:

CRIME SCENE LOCATION: El Campesina Bar, 807 S. Mirage, Lindsay

**NARRATIVE:**

- S-1: Creque, Alexander HMA 08-14-73 Porterville
- S-2: Creque, Aracelia HFA 08-14-73 Lindsay
- S-3: Garza, Jose HMA 12-14-65 Parlier
- S-4: Lopez, Saul Saenz HMA 05-19-71 Washington State

On 05-14-05, Saturday at approximately 2400hrs detectives from the Tulare County Sheriff's Department Narcotics Unit, assisted by Tulare County STEP and Gang detectives and agents from the California Alcohol Beverage Control (ABC) concluded a three week investigation regarding narcotics, prostitution and alcohol violations at the El Campesina Bar located at 807 S. Mirage in Lindsay. Detectives entered the bar and arrested a security guard, identified as Alexander Creque, for drug sales and drug possession. Another employee, identified as Aracelia Creque, was arrested for solicitation of prostitution.

Two patrons of the bar identified as Jose Garza and Saul Lopez were also arrested. Jose was found to be in possession of methamphetamine and paraphernalia and Saul was found to be too intoxicated to care for his safety. All four suspects were booked in the Tulare County Jail pending court appearances. Agents from ABC are also investigating alcohol violations within the bar.

CASE UNDER INVESTIGATION BY TCSO

REPORTING DEPUTY: Det. B. Nix #N5084

APPROVED BY:

DATE/TIME FAXED: [Fax date/time]

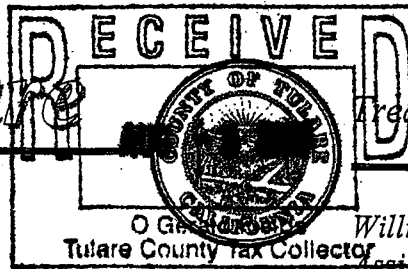
FAXED BY:

**From:** Gary Rhoden  
**To:** Deborah Kruse  
**Date:** 08/10/2005 12:24:38 PM  
**Subject:** PUBLIC DANCE HALL LICENSE/EL CAMPESINO(807 S MIRAGE-LINDSAY)

DEBORAH,  
AFTER TRYING TO GAIN COMPLIANCE FOR A RELIABLE WATER SOURCE FOR FIRE PROTECTION SINCE 2002 WE HAVE TO RECOMMEND DENIAL OF MS LOPEZ APPLICATION FOR LICENSE TO OPERATE A PUBLIC DANCE HALL. THE FIRE DEPT GAVE THEIR APPROVAL IN 2002 OR 2003 ON A SUPPOSED TEMPORARY BASIS UNTIL A FIRE HYDRANT OR 10,000 GALLON WATER TANK COULD BE INSTALLED FOR FIRE PROTECTION. TO DATE THIS HAS NOT BEEN ACCOMPLISHED. ALL OTHER FIRE AND LIFE SAFETY CONDITIONS OF PSP02-001/RESOLUTION#8011 HAVE BEEN ACCOMPLISHED AND ARE IN PLACE TODAY. LET ME KNOW IF ADDITIONAL INFORMATION IS NEEDED.  
GARY RHODEN  
DEPUTY FIRE MARSHAL  
COUNTY OF TULARE

# County of Tulare

Office of the Treasurer/Tax Collector



O. Gerald Fields

Treasurer/Tax Collector

William F. Shearer, Jr., C.P.A.

Assistant Treasurer/Tax Collector

## Application for Public Dance/Dance Hall License

DATE: JULY 21, 2005

APN: 208-030-010-000

NAME OF APPLICANT: Marilu Lopez

NAME OF BUSINESS: El Campesino

### Report from Tulare County Sheriff:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Sheriff's Department Investigating Officer

### Report from Tulare Resource Management Agency (Planning Dept):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Resource Management Agency Investigating Officer

### Report from Tulare County Health & Human Services Agency (Environmental Health):

Date: 08/01/05

Approval: [Signature]

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Health & Human Services Agency Investigating Officer

### Report from Tulare County Fire Warden:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Fire Warden Investigating Officer

# COUNTY OF TULARE



**O. GERALD FIELDS**  
**TREASURER / TAX COLLECTOR**

**Office of the Treasurer / Tax Collector**

*William F. Shearer, Jr. C.P.A.*  
*Assistant Treasurer / Tax Collector*  
221 S Mooney Blvd, County Civic Center  
Visalia, Ca. 93291-4593  
Treasurer Division, Room 103-E  
Tele: (559) 733-6528 Fax: (559) 730-2532  
Tax Division, Room 104-E  
Tele: (559) 733-6526, Fax: (559) 733-6988

May 16, 2005

Marilu Lopez  
878 W Mariposa  
Lindsay CA 93247

## **BUSINESS LICENSE RENEWAL NOTICE**

You are hereby advised that your Tulare County **DANCE HALL LICENSE** will expire on June 30th. If you wish to have your license renewed, please complete this form and return to the following address with a **MONEY ORDER OR CASHIER'S CHECK** for the amount due:

**O. GERALD FIELDS**  
**TULARE COUNTY TAX COLLECTOR**  
**221 S MOONEY BLVD, RM 104-E**  
**VISALIA, CA 93291-4593**

Your renewal must be received prior to the expiration date. If notice is submitted **AFTER** the expiration date, a new application will be required and your authority to conduct business will be revoked while the new application is being processed.

Name of business: **El Campesino** \_\_\_\_\_

Mailing address: **878 W Mariposa** \_\_\_\_\_

City,State, Zip: **Lindsay CA 93247** \_\_\_\_\_ Ph: \_\_\_\_\_

Situs Address: **807 S Mirage** \_\_\_\_\_

City,State,Zip: **Lindsay CA 93247** \_\_\_\_\_ Ph: \_\_\_\_\_

(IF YOU ARE RENEWING WITH AN EXEMPTION STATUS AT NO FEE DUE YOU **MUST** SUBMIT A COPY OF YOUR EXEMPTION STATUS VERIFICATION FROM THE IRS.)

This notice **MUST** be returned with remittance.

**Renewal Fee: \$100.00**

\_\_\_\_\_  
Dated

\_\_\_\_\_  
Signature of Applicant

If you have any questions regarding your business license, please contact:

**Kristy L. Gill, Deputy Tax Collector**  
**Telephone: (559) 733-6526 ext 209**

# County of Tulare

Office of the Treasurer/Tax Collector



O. Gerald Fields  
Treasurer/Tax Collector

William F. Shearer, Jr., C.P.A.  
Assistant Treasurer/Tax Collector

## Application for Public Dance/Dance Hall License

DATE: JULY 21, 2005 APN: 208-030-010-000

NAME OF APPLICANT: Marilu Lopez

NAME OF BUSINESS: El Campesino

### Report from Tulare County Sheriff:

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Sheriff's Department Investigating Officer

### Report from Tulare Resource Management Agency (Planning Dept):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Special Conditions: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Resource Management Agency Investigating Officer

### Report from Tulare County Health & Human Services Agency (Environmental Health):

Date: \_\_\_\_\_

Approval: \_\_\_\_\_

Denial: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_

By: \_\_\_\_\_

Health & Human Services Agency Investigating Officer

### Report from Tulare County Fire Warden:

Date: 08-16-05

Approval: \_\_\_\_\_

Denial: Applied 08-16-05

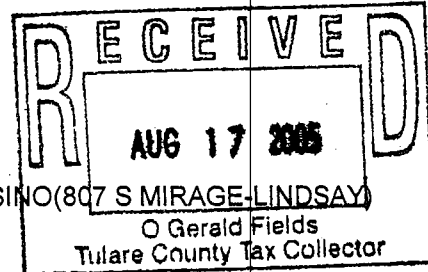
Reason for Denial: Lack of 10,000 Gallon

Water Storage Tank For  
Fire Protection.

By: Gary Phelan

Deputy Fire Marshal  
Fire Warden Investigating Officer

**From:** Gary Rhoden  
**To:** Deborah Kruse  
**Date:** 08/10/2005 12:24:33 PM  
**Subject:** PUBLIC DANCE HALL LICENSE/EL CAMPESINO(807 S MIRAGE-LINDSAY)



DEBORAH,  
AFTER TRYING TO GAIN COMPLIANCE FOR A RELIABLE WATER SOURCE FOR FIRE PROTECTION SINCE 2002 WE HAVE TO RECOMMEND DENIAL OF MS LOPEZ APPLICATION FOR LICENSE TO OPERATE A PUBLIC DANCE HALL. THE FIRE DEPT GAVE THEIR APPROVAL IN 2002 OR 2003 ON A SUPPOSED TEMPORARY BASIS UNTIL A FIRE HYDRANT OR 10,000 GALLON WATER TANK COULD BE INSTALLED FOR FIRE PROTECTION. TO DATE THIS HAS NOT BEEN ACCOMPLISHED. ALL OTHER FIRE AND LIFE SAFETY CONDITIONS OF PSP02-001/RESOLUTION#8011 HAVE BEEN ACCOMPLISHED AND ARE IN PLACE TODAY. LET ME KNOW IF ADDITIONAL INFORMATION IS NEEDED.  
GARY RHODEN  
DEPUTY FIRE MARSHAL  
COUNTY OF TULARE