

AGENCY I.D.
SC0260400

INCIDENT REPORT

CASE NUMBER

2 0 2 4 0 5 5 1 9 1

NCIC

INQ. ENTD.

EVENT	INCIDENT TYPE				COMPLETED	FORCED ENTRY	PREMISE TYPE	UNITS ENTERED	TYPE VICTIM						
	1. 13A - Aggravated Assault				<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	13		<input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Financial <input type="checkbox"/> Government <input type="checkbox"/> Relig. Orgn. <input type="checkbox"/> Soc./Public <input type="checkbox"/> Other <input type="checkbox"/> Unknown <input type="checkbox"/> Police Off.						
	INCIDENT LOCATION (SUBDIVISION, APARTMENT AND NUMBER, STREET NAME AND NUMBER)				DISPATCH DATE/TIME 24 HR. CLOCK		ZIP CODE	WEAPON TYPE							
VICTIM NO. 1	2 COLDWATER CIR				05/07/2024 18:45		29588								
	INCIDENT DATE	24 HR. CLOCK	TO	DATE	24 HR. CLOCK	DISP. DATE	DISP. TIME	TIME ARRIVED	DEPART. TIME	LOCATION NO.					
	05/07/2024	18:30		05/07/2024	19:00	05/07/2024	18:45	18:50	19:14						
COMPLAINANT'S NAME (LAST, FIRST, MIDDLE)				RELATIONSHIP TO SUBJECT	RESIDENT	RACE	SEX	AGE	ETH.	DAYTIME PHONE	EVENING PHONE				
					J S O U					H B	H B				
ADDRESS				CITY	STATE	ZIP CODE	LOCATION NO.								
VICTIM'S NAME (LAST, FIRST, MIDDLE)				RELATIONSHIP TO SUBJECT	RESIDENT	RACE	SEX	AGE	ETH.	DAYTIME PHONE	EVENING PHONE				
[REDACTED]				#1	X S O U	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	H B	H B				
HEIGHT	WEIGHT	HAIR	EYES	FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.											
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]												
ADDRESS				CITY	STATE	ZIP CODE	LOCATION NO.								
[REDACTED]				[REDACTED]	[REDACTED]	[REDACTED]									
VISIBLE INJURY (VICT. 1) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO EXPLAIN				COMPLAINT OF ANY NON-VISIBLE INJURIES <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO											
VICTIM (NO. 1) USING: ALCOHOL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK				DRUGS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK				TYPE:							
TWO-MAN VEH. <input type="checkbox"/>				ONE-MAN VEH. <input type="checkbox"/>		DETECTIVE/SPLASMT. <input type="checkbox"/>		OTHER <input type="checkbox"/>		ALONE <input type="checkbox"/>		ASSISTED <input type="checkbox"/>			
										J - This Jurisdiction		S - State			
												O - Out of State			
												U - Unknown			
SUBJECT NO. 1	<input checked="" type="checkbox"/> SUSPECT	NAME (LAST, FIRST, MIDDLE)				RACE	SEX	AGE	ETH.	DATE OF BIRTH	HEIGHT	WEIGHT	HAIR	EYES	
	<input type="checkbox"/> RUNAWAY	[REDACTED]				[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
	<input type="checkbox"/> WANTED	FACIAL HAIR, SCARS, TATOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.													
<input type="checkbox"/> WARRANT	ADDRESS				CITY	STATE	ZIP CODE	LOCATION NO.							
<input type="checkbox"/> ARREST	[REDACTED]				[REDACTED]	[REDACTED]	[REDACTED]								
<input type="checkbox"/> JAIL	SUBJECT (NO. 1) USING: ALCOHOL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK				ARRESTED NEAR OFFENSE SCENE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		DATE/TIME OF OFFENSE			DATE/TIME OF ARREST					
<input type="checkbox"/> SUMMONS	DRUGS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> UNK				TOTAL # ARRESTED 0		5/7/2024 6:30:00 PM								
NARRATIVE	<p>On 5/7/24, I Officer Thornton responded to the area of 3 [REDACTED] Palmetto Point Blvd., Myrtle Beach SC 29588, in reference to a weapons incident. Prior to my arrival, dispatch advised that the complainant was being followed by a subject and the driver had threatened him with a firearm. The victim advised that he was still driving and being followed by the suspect. Dispatch advised the victim to drive until an officer was able to get out with him. Shortly after, Other officers had gotten out with the suspect vehicle which had pulled into the parking lot. The driver, who was identified as the suspect, had given the officers consent to search his vehicle. The victim, stated that the male had showed up at his house and was making gestures out the window at him. He was scared of what the male might do, she he got into his vehicle and left. He claimed that the suspect had followed him and was waving something out the window he believed to be a firearm. The victim stated he was not completely sure that it was a firearm and it could have been something else. Officers searched the vehicle, but did not locate anything inside the vehicle.</p> <p>The suspect was not cooperative with officers, and was eventually told he was free to leave. There was no evidence that the suspect was threatening him or was waving a gun out the window. The victim claimed that he was concerned for his</p>														
	JURISDICTION OF THEFT LAW ENFORCEMENT AGENCY							JURISDICTION OF RECOVERY LAW ENFORCEMENT AGENCY							
PROPERTY EST.	TYPE (GROUP)											TOTAL VALUE			
	STOLEN														
	DAMAGED														
	BURNED														
	RECOVERED														
SEIZED															
ADMINISTRATIVE	SUBJECT IDENTIFIED		SUBJECT LOCATED		<input type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. CLOSED		<input type="checkbox"/> ARRESTED UNDER 18		<input type="checkbox"/> EX-CLEAR UNDER 18						
	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		<input checked="" type="checkbox"/> UNFOUNDED		<input type="checkbox"/> ARRESTED 18 AND OVER		<input type="checkbox"/> EX-CLEAR 18 AND OVER						
	REASON FOR EXCEPTIONAL CLEARANCE: 1. <input type="checkbox"/> OFFENDER DEATH. 2. <input type="checkbox"/> NO PROSECUTION. 3. <input type="checkbox"/> EXTRADITION DENIED. 4. <input type="checkbox"/> VICTIM DECLINES COOPERATION. 5. <input type="checkbox"/> JUVENILE - NO CUSTODY														
	REPORTING OFFICER(S)			DATE	UNIT NUMBER	APPROVING OFFICER				DATE	UNIT NUMBER				
	Thornton, Benjamin			05/07/2024	638										
FOLLOW-UP INVESTIGATION <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO OFFICER															

safety due to recent events he was involved in. The suspect was informed that he was being trespassed from the victims residence at 2█ Coldwater Cir., Myrtle Beach SC 29588, where the incident started. Case is closed unfounded since there is no evidence to support the victims claims.

Nothing further

**COURTESY OF
LUNA SHARK MEDIA**