

# OPS Complaint File Closeout Report

OPS Control Number: 19-I-0587-VA Date Investigation Received: 10-23-19

Date Investigation Completed: 09-25-19 Date Investigation Adjudicated: 10-30-19

Accused Employee: MELVIN POTTER R/S: Blm Unique ID: 6603

Accused Employee's Assignment: FOD 23 EW  
DIVISION SECTION WATCH

Investigative Disposition:

	Work Rule #1	Work Rule #2	Work Rule #3	Work Rule #4	Work Rule #5
<b>Rule Number(s):</b>	4.4.4.				
<b>Disciplinary Action:</b>	EX				
<b>Modified Action:</b>	-				
<b>Disciplinary Category:</b>	-				
<b>Date of Action</b>	10-30-19				

Waiver:  YES  NO CVSA:  YES  NO SAA:  YES  NO

Reimbursement Payment:  YES  NO

Special Conditions and / or Agreement: \_\_\_\_\_

Accused Employee: \_\_\_\_\_ R/S: \_\_\_\_\_ Unique ID: \_\_\_\_\_

Accused Employee's Assignment: \_\_\_\_\_  
DIVISION SECTION WATCH

Investigative Disposition:

	Work Rule #1	Work Rule #2	Work Rule #3	Work Rule #4	Work Rule #5
<b>Rule Number(s):</b>					
<b>Disciplinary Action:</b>					
<b>Modified Action:</b>					
<b>Disciplinary Category:</b>					
<b>Date of Action</b>					

Waiver:  YES  NO CVSA:  YES  NO SAA:  YES  NO

Reimbursement Payment:  YES  NO

Special Conditions and / or Agreement: \_\_\_\_\_

Form Completed by: SPO G.A. Cone Date: 11-12-19



MEMORANDUM

TO: Major C. N. Tyus

FROM: Deputy Chief J. L. Glazier *JLG*

DATE: November 5, 2019

RE: OPS FILE #19-I-0587-VA (Officer Melvin Potter)

I have reviewed the listed file and taken the following actions:

Concur with Section Commander:

Did not concur with Section Commander:

Recommended Discipline Modified:

My recommendation is as follows:

**Disciplinary:**

Oral Admonishment Work Rule(s):	<input type="checkbox"/>	Written Reprimand Work Rule(s):	<input type="checkbox"/>
Suspension Number of Days: Work Rule(s):	<input type="checkbox"/>		

**Non-Disciplinary:**

Not Sustained Work Rule(s):	<input type="checkbox"/>	Exonerated Work Rule(s): 4.4.4	<input checked="" type="checkbox"/> <i>JLG</i>
Exceptionally Closed Work Rule(s):	<input type="checkbox"/>	Unfounded Work Rule(s):	<input type="checkbox"/>



# City of Atlanta Internal Correspondence

Atlanta Police Department

## MEMORANDUM

**TO:** Major A. Senzer  
**FROM:** Major C. Tyus  
**DATE:** October 23, 2019  
**RE:** Command Investigation of OPS Complaint File: 19-I-0587-VA  
**Officer Melvin Potter**

**ATTENTION: Pursuant to the Disciplinary Manual, section 4.2.2(5), the file should Be completed and returned on November 13, 2019.**

It is the policy of the Atlanta Police Department that an allegation(s) of misconduct be investigated. Therefore, this OPS complaint file is assigned to your division for that investigation. An investigation is not complete until the file is reviewed by the chain of command and the commander of OPS. If additional time is needed to complete the investigation, the investigating supervisor must request an extension in writing.

Please expedite your investigation and return the file to OPS on or before the date indicated above. If you have any questions about this file, please contact Lieutenant B. Paden at 404-546-5945.

*Date Stamp the Appropriate Block*

Delivered to Division	Delivered to Section	Returned to Division	Returned to OPS
			RECEIVED  NOV 07 2019  OFFICE OF PROFESSIONAL STANDARDS

CinvMemo1

# ATLANTA POLICE DEPARTMENT DISCIPLINARY COMPLAINT FOLDER INDEX

EMPLOYEE NAME: Potter, Melvin

OPS CONTROL #: 19-I-0587-VA

Item No.	Item	Number of Pages	Initials	Date
1	Index	1	JSJ	09/21/2019
2	Supervisor Complaint Checklist	1	JSJ	09/21/2019
3	Preliminary Complaint Form	1	JSJ	09/21/2019
4	Notice of Allegations	1	JSJ	09/21/2019
5	Awareness Statement	1	JSJ	09/21/2019
6	Employee Statement	2	JSJ	09/21/2019
7	Accident Investigation Summary	1	JSJ	09/21/2019
8	Significant Events	1	JSJ	09/21/2019
9	Accident Report	3	JSJ	09/21/2019
10	Incident Report	2	JSJ	09/21/2019
11	Estimate	10	JSJ	09/21/2019
12	Investigation Disposition Form	1	JSJ	09/21/2019
13	Photos	N/A	JSJ	09/21/2019
14				
15				
16				
17				
18				
19				
20				

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**ATLANTA POLICE DEPARTMENT  
SUPERVISOR COMPLAINT INVESTIGATION CHECKLIST**

EMPLOYEE NAME: Potter, Melvin

OPS CONTROL #: 19-I-0587-VA

**INVESTIGATIVE FOLDER**

- 1. Disciplinary Complaint Folder Index
- 2. Supervisor Complaint Investigation Checklist
- 3. Preliminary Complaint Form (For all formal complaints)
- 4. Citizen Statements (Where applicable)
- 5. Employee Statements
- 6. Complaint Investigation Disposition Form (Command Investigations) OR  
Complaint Transmittal Summary Memorandum (OPS Investigations)
- 7. Any Supporting Documentation (See below list)
 

<input checked="" type="checkbox"/>	Offense Report	<input type="checkbox"/>	Lab Results
<input checked="" type="checkbox"/>	Accident Report	<input checked="" type="checkbox"/>	Photos
<input type="checkbox"/>	Medical Release	<input type="checkbox"/>	Video Tape/Audio Tape
<input type="checkbox"/>	Other	<input type="checkbox"/>	Other

Sgt. J. Saint Jean

09/21/2019

**Investigation Completed By**

**Date Completed**

**DETERMINE DISCIPLINARY ACTION**

8. Disciplinary Worksheet (Filled out by supervisor)

**NON-ADVERSE ACTION**

9. Oral Admonishment given to (Employee) \_\_\_\_\_ by \_\_\_\_\_  
(Supervisor) \_\_\_\_\_ for rule \_\_\_\_\_ on \_\_\_\_\_

10. Written Reprimand given to (Employee) \_\_\_\_\_ by \_\_\_\_\_  
(Supervisor) \_\_\_\_\_ for rule \_\_\_\_\_ on \_\_\_\_\_

I have received a copy of this form. \_\_\_\_\_ on \_\_\_\_\_  
(Employee Name) (Date)

**ADVERSE DISCIPLINARY ACTION**

11. Notice of Proposed Adverse Action (NPAA) issued (Date) \_\_\_\_\_

12. Extension of time form (When applicable)

13. Notice of Final Adverse Action (NFAA) issued (Date) \_\_\_\_\_  
NFAA issued by (Name)

**PROACTIVE CORRECTIVE ACTION**

14. Memorandum on Corrective Action (If applicable, includes counseling)

15. Training given on \_\_\_\_\_ for \_\_\_\_\_

16. Other

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# ATLANTA POLICE DEPARTMENT PRELIMINARY COMPLAINT FORM

<input type="checkbox"/> OPS INVESTIGATION	<input checked="" type="checkbox"/> COMMAND INVESTIGATION	COMPLAINT NUMBER <b>192532349</b>	OPS CONTROL NUMBER <b>19-I-0587-VA</b>
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<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="4">DATE &amp; TIME COMPLAINT RECEIVED</th> <th colspan="4">DATE OF INCIDENT</th> </tr> <tr> <td>MO</td><td>DAY</td><td>YR.</td><td>TIME</td> <td>MO</td><td>DAY</td><td>YR.</td><td>TIME</td> </tr> <tr> <td>09</td><td>10</td><td>2019</td><td>2128</td> <td>09</td><td>10</td><td>2019</td><td>2128</td> </tr> </table>	DATE & TIME COMPLAINT RECEIVED				DATE OF INCIDENT				MO	DAY	YR.	TIME	MO	DAY	YR.	TIME	09	10	2019	2128	09	10	2019	2128	ADDRESS OF OCCURRENCE <b>I-75-85 Ramp SW / University Ave SW</b>
DATE & TIME COMPLAINT RECEIVED				DATE OF INCIDENT																					
MO	DAY	YR.	TIME	MO	DAY	YR.	TIME																		
09	10	2019	2128	09	10	2019	2128																		
<b>BRIEFLY DESCRIBE ALLEGATIONS</b>		AUDIO AND VIDEO TAPES THAT ARE PART OF THIS FILE  VIDEO TAPES OF INTERVIEWS <input type="checkbox"/> AUDIO TAPES OF 911 RADIO <input type="checkbox"/> OTHER TAPES <input type="checkbox"/>																							

**APD.SOP.2010/4.4.4 OPERATION OF CITY VEHICLE**  
 On 09/10/2019 around 2128hrs Off. M. Potter operating vehicle #33414 was traveling East Bound on University Ave at I-75-85 Ramp SW. Mr. Kunta Smith was traveling Westbound on University turning South bound on to I-75-85 Ramp SW operating his White GMC Pickup truck. Mr. Smith made a left turn from University Ave striking Off. Potter (Unit 3302) causing major front-end damage of the patrol vehicle. All airbags were deployed because of the accident. Officer Potter and Mr. Smith sustained injures because of the accident. Mr. Smith and Officer Potter were transported to Grady Hospital. Mr. Smith admitted to Officer Tabor that on a scale from 1 to 10 of the level of his intoxication was an 8. Mr. Smith was placed under arrest, was charged accordingly, and was transported to Grady Detention by Officer D. Tabor. I.D. Unit 7335 responded to the location to take photos of the accident scene. Both vehicles were no longer drivable and had to be towed.

COMPLAINANT INFORMATION										
USE "C" FOR COMPLAINANT, USE "P" FOR PARENT OR GUARDIAN, USE "W" FOR WITNESS, USE "S" FOR SUPERVISOR										
CODE	NAME (LAST, FIRST, MI)					RACE	SEX	DOB		
S	Saint Jean, Jean B					Black	Male	[REDACTED]		
RESIDENT ADDRESS					HOME PHONE		BUSINESS PHONE			
880 Cherokee Ave SW					404-624-0674					
DESCRIBE INJURIES					HOSPITAL TAKEN TO	PHOTO ID #	SUSPECT WEAPON		WEAPON SERIAL #	
ACCUSED #1 NAME (LAST, FIRST MI)					RANK	RACE	SEX	DOB	DOE	4 DIGIT ID NO
Potter, Melvin					Officer	Black	Male	[REDACTED]		6603
DIVISION	ASSIGNMENT SECTION	WATCH	ON DUTY	OFF DUTY	DUTY STATUS	TMP ASGN	XTRA JOB	WEAPON		FIREARMS DISCHARGE ONLY
FOD	Zone 3	EVE	Yes		No					WEAPON SERIAL #
										# SHOTS
DESCRIBE INJURIES					HOSPITAL TAKEN TO	PHOTO ID. NO.	TYPE OF DRUG TEST			
ACCUSED #2 NAME (LAST, FIRST, MI)					RANK	RACE	SEX	DOB	DOE	4 DIGIT ID NO
DIVISION	ASSIGNMENT SECTION	WATCH	ON DUTY	OFF DUTY	DUTY STATUS	TMP ASGN	XTRA JOB	WEAPON		FIREARMS DISCHARGE ONLY
										WEAPONS SERIAL #
										# SHOTS
DESCRIBE INJURIES					HOSPITAL TAKEN TO	PHOTO ID. NO.	TYPE OF DRUG TEST			
ACCUSED #3 NAME (LAST, FIRST, MI)					RANK	RACE	SEX	DOB	DOE	4 DIGIT ID NO
DIVISION	ASSIGNMENT SECTION	WATCH	ON DUTY	OFF DUTY	DUTY STATUS	TMP ASGN	XTRA JOB	WEAPON		FIREARMS DISCHARGE ONLY
										WEAPONS SERIAL #
										# SHOTS
DESCRIBE INJURIES					HOSPITAL TAKEN TO	PHOTO ID. NO.	TYPE OF DRUG TEST			

SUPERVISOR RECEIVING COMPLAINT	INVESTIGATOR ASSIGNED	DATE ASSIGNED	DATE COMPLETE
Sgt. J. Saint Jean	[Signature]		09/21/2019

ATLANTA POLICE DEPARTMENT  
Written Notice of Allegations

Employee: Potter, Melvin APD ID # 6603 OPS#: 19-I-0587-VA

Allegation: (Type Allegation and Work Rule #)  
APD.SOP.2010/4.4.4 OPERATION OF CITY VEHICLE

According to APD.SOP.2020 your responsibilities, restrictions, and rights as an employee are:

**3.4 Employee Responsibilities**

All employees must answer questions and/or make available any relevant materials or sworn statements concerning an investigation of employee misconduct when directed to do so by a disciplinary authority or duly appointed investigator. Employees will provide all relevant information and materials and answer all questions honestly, completely, and to the best of their ability. An employee's refusal to cooperate and provide sworn statements, answers, or relevant materials during an authorized administrative investigation will result in disciplinary action, up to and including dismissal.

Any employee reporting for duty under the influence of any substance such as prescription medications, alcohol, over the counter medications, or other substances that, while legal, may adversely affect the judgment or performance of that employee during duty hours, must notify his or her immediate supervisor prior to commencing work.

**3.5 Employee Restrictions**

Except as authorized, in an investigation into employee misconduct, employees may not:

Interfere with the complaint investigation in any manner

Independently participate in the investigation

Be present during any investigative contact with a complainant or with witness involved in the investigation

Contact the complainant or witness concerning the allegations; or

Discuss the existence or facts of a complaint with anyone except designated Department authorities conducting the investigation.

This restriction will not be construed to prohibit an employee from discussing any aspects of a complaint with his or her attorney or other representative, or to prevent his or her attorney from developing information for his or her defense.

**3.6 Employee Rights**

All employees have the right to have an attorney or other representative present during questioning in an administrative investigation. However, any employee who is either an accused employee or a witness in a complaint investigation may not act in the capacity of representative for any other employee being questioned as an accused or witness in that complaint investigation. An employee's representative shall be allowed to consult with the employee, and to object to questions, but shall not delay or interfere with the questioning process. Any objections to the form or content of the questions will be noted, but the employee shall still be required to answer fully and completely any and all questions presented during the investigation. An employee cannot delay questioning for more than three hours beyond the time he or she was given notice to appear for the questioning.

The employee being questioned as the accused will be issued the Written Notice of Allegations form (Form APD 848), which includes, but is not limited to a written statement of the allegation(s) and the employee's rights and responsibilities relative to the investigation against him/her prior to any questioning.

All employees who are subject to any form of discipline, whether non-adverse or adverse action, will be given written documentation of the disciplinary action taken. This written documentation must state the work rule which applies to the disciplinary action taken, information and/or documentation supporting the alleged work rule violation, and the disciplinary action that was taken. Employees must sign the written documentation stating that they have been notified of the disciplinary action taken. The employee's signature does not constitute an admission of guilt or wrongdoing, it serves only as receipt of the written documentation of disciplinary action and notification of the same.

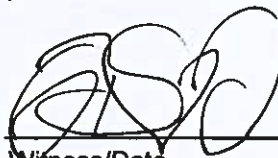
The employee against whom a complaint has been filed may review the investigative folder upon completion of that investigation. The OPS commander will designate the area where the folder is to be reviewed and establish rules governing the review of the folder.

If the employee is being questioned as a suspect in a criminal investigation, the employee will be afforded complete Miranda Rights.

Administrative statements made by employees and evidence gained as a result of such statements shall not be used against the employee in criminal proceedings involving the employee except in cases of perjury.

I have received a copy of the allegation(s) and my rights and responsibilities relative to the investigation against me as the accused prior to any questioning.

  
10/25/19  
Employee Signature/Date

  
10/25/19  
Witness/Date



**ATLANTA POLICE DEPARTMENT**  
**Awareness Statement: Truthfulness**

OPS Complaint # 19-I-0587-VA

This statement form will be completed for every employee, accused or witness, in its entirety by the interviewer, and will be signed by the employee, prior to obtaining a statement for any allegation being investigated by the investigating authority.

I am aware that I will be **dismissed** for a Sustained violation of APD.SOP.2010, "Employee Work Rule" 4.1.03 (Truthfulness) which reads:

*"Employees will be truthful in their written and spoken words at all times."*

Do you understand this statement?     Yes     No

Melvin Bttor  
(Employee's Printed Name)

[Signature]  
(Employee's Signature)

10/25/19 17:36  
(Date/Time)

Sgt. Sean Saint Jean  
(Interviewer's Printed Name)

[Signature]  
(Interviewer's Signature)

10/25/19 1736  
(Date/Time)

\_\_\_\_\_  
(Witness Representative's Printed Name)

\_\_\_\_\_  
(Witness/Representative's Signature)

\_\_\_\_\_  
(Date/Time)



# ATLANTA POLICE DEPARTMENT EMPLOYEE STATEMENT

EMPLOYEE:

OPS # 19-I-0587-VA

EMPLOYEE NAME (LAST, FIRST, MI) <b>Potter, Melvin</b>			CLASSIFICATION <b>Officer</b>	POSITION NUMBER <b>37645</b>	DATE & TIME OF STATEMENT <b>10/25/2019/1735</b>		
RACE <b>Black</b>	SEX <b>Male</b>	DOB <b>[REDACTED]</b>	DATE OF EMPLOYMENT <b>04/2016</b>	4 DIGIT ID NO. <b>6603</b>	DIVISION <b>FOD</b>	SECTION <b>Z-3</b>	WATCH <b>EVE</b>
Investigator's Name <b>I am Sgt. J. Saint Jean of the Atlanta Police Department</b>						TYPE STATUS <b>Accused</b>	
in an official investigation by the Department. Also present is:				REPRESENTATIVES NAME: <b>N/A</b>			

All employees must answer questions and make available relevant materials or sworn statements concerning an investigation of allegations of employee misconduct when directed to do so by a disciplinary authority or duly appointed investigator. Employees may obtain representation but cannot delay questioning for more than three hours beyond the time he or she was notified of the questioning. Except as authorized or required, an employee shall not interfere with nor contact persons involved in an internal investigation nor disclose or discuss with anyone except the designated Departmental authority the existence or facts of an internal investigation. This restriction will not be construed to prohibit an employee from discussing any aspect of the investigation with his or her representative. Administrative statements made by employees and evidence gained by reasons of such statements may not be used against the employee in criminal proceedings involving the employee except in cases of perjury.

Q: Were you employed by the City of Atlanta on Sept. 10th, 2019?

A: Yes.

Q: What was your assignment on that day?

A: 3302.

Q: Were you operating vehicle # 33414 on that day?

A: Yes.

Q: Were you involved in the vehicle accident on that day at I-75-85 Ramp SW and University Ave SW

A: Yes.

Q: Can you please describe the events of that accident?

A I was traveling Eastbound on University Ave just before the entrance ramp to I-75 South. While passing under the green light at that intersection, at that point I observed a white pickup truck

I have read or had read to me the above statement and I swear or affirm that it is true to the best of my knowledge and belief.

EMPLOYEE SIGNATURE

Sworn and subscribed to me this 25 day of October in the year 2019

Melvin Potter

PRINT EMPLOYEE NAME

NOTARY PUBLIC

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**ATLANTA POLICE DEPARTMENT  
EMPLOYEE STATEMENT**

EMPLOYEE:

OPS # 19-I-0587-VA

making a left hand turn in front of me. I was unable to avoid the contact. The truck hit the front left front side of my vehicle.

Q: Do you have anything else you would like to add to your statement?

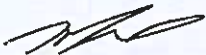
A: No.

Q: Are you willing to submit a Computer Voice Stress Analysis (CVSA) if it becomes necessary?

A: Yes.


\*\*\* END OF STATEMENT\*\*\*

I have read or had read to me the above statement and I swear or affirm that it is true to the best of my knowledge and belief.



EMPLOYEE SIGNATURE

Sworn and subscribed to me this 25 day of October in the year 2019



PRINT EMPLOYEE NAME

NOTARY PUBLIC

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# ATLANTA POLICE DEPARTMENT

## Supervisor's Accident Investigation Summary

Employee's name: <b>Potter, Melvin</b>		Rank or title <b>Officer</b>		ID no. <b>6603</b>
Division/section/unit/watch <b>FOD/Zone 3/Evening</b>			Assign no. <b>3302</b>	
Time in assignment <b>3 yrs</b>	Date of employment <b>08/30/93</b>	Probationary status <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
City vehicle no. <b>33414</b>	Accident date <b>09/10/2019</b>	Time <b>2128</b>		
Accident location <b>I-75-85 Ramp/Univrs</b>			Incident no. <b>192532349</b>	
Name of accident responding officer <b>D. Tabor</b>			Assignment no. <b>3306</b>	
Name of accident responding supervisor <b>Sgt. N. Mercado</b>				

**The supervisor must complete the following reports, when appropriate (check those that are attached):**

- Supervisor's Accident Investigation Summary (Form APD 705)
- Accident Report
- Incident report on injury to officer, damage to City property, etc.
- Copy of workers comp package
- Pursuit report package (see APD.SOP.3050 "Pursuit Policy")
- OPS package (see Disciplinary Manual)  OPS Control Number 19-1-0587-VA
- AVAIL - history, if vehicle is equipped
- Watchguard video of incident
- Citizen Statement (APD FORM 824) *(completed on scene -hand written)*
- Video from the Video Integration Center  Yes  No

If no Watchguard video, or AVAIL history provide explanation:

**Investigating Supervisors Summary of Accident:** *(Include a narrative summary of what the employee was doing prior to and at the time of the accident; a detailed analysis of the accident; amount of damage; and contributing factors.)*

On 09/10/2019 around 2128hrs Off. M. Potter operating vehicle #33414 was traveling East Bound on University Ave at I-75-85 Ramp SW. Mr. Kunta Smith was traveling Westbound on University turning South bound on to I-75-85 Ramp SW operating his White GMC Pickup truck. Mr. Smith made a left turn from University Ave striking Off. Potter (Unit 3302) causing major front end damage of the patrol vehicle. All airbags were deployed because of the accident. Officer Potter and Mr. Smith sustained injures because of the accident. Mr. Smith and Officer Potter were transported to Grady Hospital. Mr. Smith admitted to Officer Tabor that on a scale from 1 to 10 of the level of his intoxication was an 8. Mr. Smith was placed under arrest, was charged accordingly and was transported to Grady Detention by Officer D. Tabor. I.D. Unit 7335 responded to the location to take photos of the accident scene. Both vehicles were no longer drivable and had to be towed.

**Investigating Supervisor and Section Commander Signatures:**

Investigating Supervisors Signature: **Sgt. J. Saint Jean**



Date **10/25/2019**

Section Commanders Signature: 

Date

**10-31-19**



# ATLANTA POLICE DEPARTMENT

## Significant Event Report

Division: <u>FOD</u> Date: <u>09/10/2019</u>	Unit: <u>Zone 3 Evening</u> Time: <u>2128</u>
Location: <u>I-75-85 RampSW/ University Ave SW</u> Complaint No.: <u>19-253-2349</u>	Beat: <u>302</u> Signal: <u>41P</u> Reporting Supervisor: <u>Sgt. N. Mercado</u>
Victim Victim's Name: <u>COA</u> Date of Birth: _____	Victim's Gender: _____      Race: _____
Suspect Suspect's Name: <u>Smith, Kunta</u> Date of Birth: <span style="background-color: black; color: black;">██████████</span>	Suspect's Address: <u>165 Sawgrass Dr Atl 30349</u> Gender: <u>M</u> Race: <u>B</u>

Other Unit Notification: Sgt. N. Mercado #3393, Officer Tabor #3306, Officer Dely 3303 ID Tech #7335

### Narrative

On 09/10/2019 around 2128hrs Off. M. Potter operating vehicle #33414 was traveling East Bound on University Ave at I-75-85 Ramp SW. Mr. Kunta Smith was traveling Westbound on University turning South bound on to I-75-85 Ramp Sw operating his White GMC Pickup truck. Mr. Smith made a left turn from University Ave striking Off. Potter (Unit 3302) causing major front end damage of the patrol vehical. All airbags were deployed as a result of the accident. Officer Potter and Mr. Smith sustained injure's as a result of the accident. Mr. Smith and Officer Potter were transported to Grady Hospital. Mr. Smith admitted to Officer Tabor that on a scale from 1 to 10 of the level of his intoxication was an 8. Mr. Smith was placed under arrest by Officer Tabor and transported to Grady Detention. I.D. Unit 7335 responded to the location to take photos of the accident scene. Mr. Smith was cited and placed under arrest. Both vehicles were no longer drivable and had to be towed.



Signature: \_\_\_\_\_

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

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Agency Case Number 192532349 - 00		Agency NCIC N GAAPD00		GEORGIA MOTOR VEHICLE CRASH REPORT		County FULTON		Date Rec. by GDOT		
Estimated Crash Date Time		Dispatch Date Time		Arrival Date Time		Total Number of Vehicles Injuries Fatalities			Inside City Of ATL	
09/10/19 2128		09/10/19 2128		09/10/19 2128		2 2 0			ATL	
Road of Occurrence _____						At its Intersection With _____			<input type="checkbox"/> Corrected Report	
Not At its Intersection But _____						Of <u>I-75-85 SB EXPY RAMP</u>			<input type="checkbox"/> Sup To Original	
Latitude (Y) (Format) <u>033.72213</u> 00000000						Longitude (X) (Format) <u>084.39569</u> 00000000			<input type="checkbox"/> Hit and Run	
Unit # 1	<input checked="" type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME SMITH	FIRST KUNTA	MIDDLE JAMORRO	Unit # 2	<input type="checkbox"/> Driver <input type="checkbox"/> Ped <input type="checkbox"/> Bike	LAST NAME M. POTTER	FIRST	MIDDLE	
<input checked="" type="checkbox"/> Susp At Fault	Address 165 SAWGRASS DR				<input type="checkbox"/> Susp At Fault	Address 880 CHEROKEE AVE				
City ATL	State GA	Zip 30349	DOB	City ATL	State GA	Zip	DOB	City ATL	State GA	
Driver's License No. 047517728	Class C	State GA	Country	Driver's License No.	Class	State	Country	Driver's License No.	Class	
Insurance Co. PROGRESSIVE	Policy No. 931012462	Telephone No.	Insurance Co. EXEMPT	Policy No. N/A	Telephone No. (404) 624-0674	Year 2000	Make GMC	Model SON	Year 2016	
Year 2000	Make GMC	Model SON	Year 2016	Make FORD	Model INT	VIN 1GTCS1458YK250590	Vehicle Color WHI	VIN 1FAHP2MK3GG125166	Vehicle Color BLU	
Tag # RSV7665	State GA	County CLAYTON	Year 10/2019	Tag # GV6594J	State GA	County FULTON	Year 12/2999	Trailer Tag #	State	
Trailer Tag #	State	County	Year	Trailer Tag #	State	County	Year	Trailer Tag #	State	
<input type="checkbox"/> Same as Driver	Owner's Last Name SMITH	First KUNTA	Middle JAMORRO	<input type="checkbox"/> Same as Driver	Owner's Last Name CITY OF ATLANTA	First	Middle	<input type="checkbox"/> Same as Driver	Owner's Last Name CITY OF ATLANTA	
Address 165 SAWGRASS DR	City ATL	State GA	Zip 30349	Address 23 CLAIR DR	City ATL	State GA	Zip	Address 23 CLAIR DR	City ATL	
Removed By:	<input type="checkbox"/> Request <input type="checkbox"/> List	Removed By:	<input type="checkbox"/> Request <input type="checkbox"/> List	Removed By:	<input type="checkbox"/> Request <input type="checkbox"/> List	Removed By:	<input type="checkbox"/> Request <input type="checkbox"/> List	Removed By:	<input type="checkbox"/> Request <input type="checkbox"/> List	
Alco Test: 2	Type:	Results:	Drug Test: 2	Type:	Results:	Alco Test: 2	Type:	Results:	Drug Test: 2	
First Harmful Event: 11	Most Harmful Event: 11	Operator/Ped Cond: 4	First Harmful Event: 11	Most Harmful Event: 11	Operator/Ped Cond: 1	First Harmful Event: 11	Most Harmful Event: 11	Operator/Ped Cond: 1	First Harmful Event: 11	
Operator Contributing Factors: 2	Roadway Contributing Factors: 4	Operator Contributing Factors: 1	Operator Contributing Factors: 1	Operator Contributing Factors: 1	Operator Contributing Factors: 1	Operator Contributing Factors: 1	Operator Contributing Factors: 1	Operator Contributing Factors: 1	Operator Contributing Factors: 1	
Vehicle Contributing Factors:	Roadway Contributing Factors: 1	Vehicle Contributing Factors:	Roadway Contributing Factors: 1	Vehicle Contributing Factors:	Roadway Contributing Factors: 1	Vehicle Contributing Factors:	Roadway Contributing Factors: 1	Vehicle Contributing Factors:	Roadway Contributing Factors: 1	
Direction of Travel: 4	Vehicle Maneuver: 1	Non-Motor Maneuver:	Direction of Travel: 3	Vehicle Maneuver: 5	Non-Motor Maneuver:	Direction of Travel: 3	Vehicle Maneuver: 5	Non-Motor Maneuver:	Direction of Travel: 3	
Vehicle Class: 1	Vehicle Type: 2	Vision Obscured: 1	Vehicle Class: 2	Vehicle Type: 1	Vision Obscured: 1	Vehicle Class: 2	Vehicle Type: 1	Vision Obscured: 1	Vehicle Class: 2	
Number of Occupants: 2	Area of Initial Contact: 12	Damage to Veh: 4	Number of Occupants: 2	Area of Initial Contact: 12	Damage to Veh: 4	Number of Occupants: 2	Area of Initial Contact: 12	Damage to Veh: 4	Number of Occupants: 2	
Traffic-Way Flow: 1	Road Comp: 2	Road Character: 1	Traffic-Way Flow: 1	Road Comp: 2	Road Character: 1	Traffic-Way Flow: 1	Road Comp: 2	Road Character: 1	Traffic-Way Flow: 1	
Number of Lanes: 5	Posted Speed:	Work Zone: 0	Number of Lanes: 5	Posted Speed:	Work Zone: 0	Number of Lanes: 5	Posted Speed:	Work Zone: 0	Number of Lanes: 5	
Traffic Control: 2	Device Inoperative: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Traffic Control: 2	Device Inoperative: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Traffic Control: 2	Device Inoperative: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Traffic Control: 2	Device Inoperative: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Traffic Control: 2	Device Inoperative: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Citation Information:	Citation # <u>5872344</u> -	O.C.G.A. § <u>40-6-71</u>	Citation Information:	Citation # -	O.C.G.A. §	Citation Information:	Citation # -	O.C.G.A. §	Citation Information:	
Citation # <u>5872342</u> -	O.C.G.A. § <u>16-13-2</u>	Citation # <u>5872343</u> -	O.C.G.A. § <u>40-6-391.A1</u>	Citation # -	O.C.G.A. §	Citation # -	O.C.G.A. §	Citation # -	O.C.G.A. §	
COMMERCIAL MOTOR VEHICLES ONLY										
Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	Carrier Name:	
Address	City	State	Zip	Address	City	State	Zip	Address	City	
U.S. D.O.T. #	No. of Axles	G.V.W.R.	U.S. D.O.T. #	No. of Axles	G.V.W.R.	U.S. D.O.T. #	No. of Axles	G.V.W.R.	U.S. D.O.T. #	
Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cargo Body Type	Vehicle Config.	<input type="checkbox"/> Interstate <input type="checkbox"/> Intrastate	Fed. Reportable <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Cargo Body Type	Vehicle Config.	
C.D.L.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L.? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	C.D.L. Suspended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Vehicle Placarded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Vehicle Placarded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Vehicle Placarded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Vehicle Placarded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Vehicle Placarded? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Hazardous Materials? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Haz Mat Released? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	If YES: Name or four-digit number from Diamond or Box: _____	
One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	One-digit number from bottom of Diamond: _____	
<input type="checkbox"/> Ran Off Road	<input type="checkbox"/> Downhill Runaway	<input type="checkbox"/> Cargo Loss or Shift	<input type="checkbox"/> Separation of Units	<input type="checkbox"/> Ran Off Road	<input type="checkbox"/> Downhill Runaway	<input type="checkbox"/> Cargo Loss or Shift	<input type="checkbox"/> Separation of Units	<input type="checkbox"/> Ran Off Road	<input type="checkbox"/> Downhill Runaway	



Agency Case Number 192532349 - 00		Agency NCIC N GAAPD00		GEORGIA MOTOR VEHICLE CRASH REPORT			County FULTON			Date Rec. by GDOT
Estimated Crash Date: 09/10/19 Time: 2128		Dispatch Date: 09/10/19 Time: 2128		Arrival Date: 09/10/19 Time: 2128			Total Number of Vehicles: 2 Injuries: 2 Fatalities: 0			Inside City Of ATL

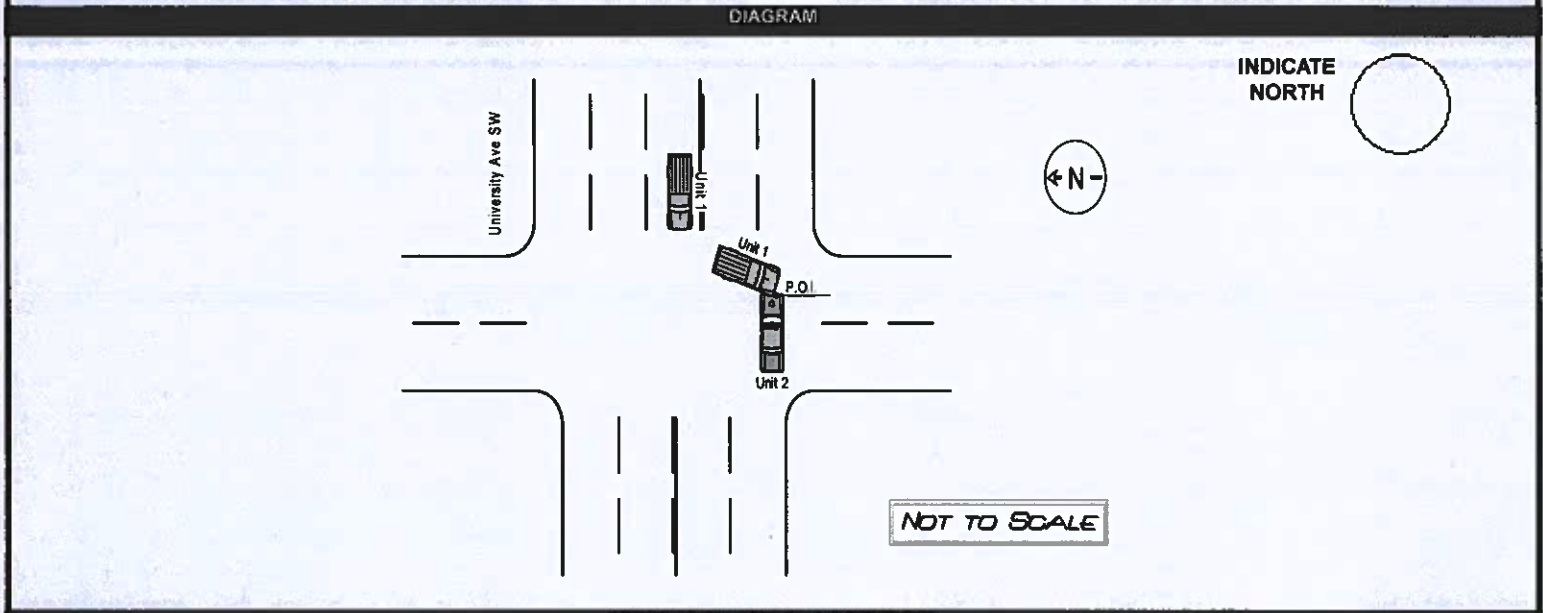
Road of Occurrence _____				At Its Intersection With _____				<input type="checkbox"/> Corrected Report		
Not At Its Intersection But _____		<input type="checkbox"/> Miles <input type="checkbox"/> North <input type="checkbox"/> East		<input type="checkbox"/> Feet <input type="checkbox"/> South <input type="checkbox"/> West		Of <u>I-75-85 SB EXPY RAMP</u>				<input type="checkbox"/> Sup To Original
Latitude (Y) (Format)		033.72213 0000000		Longitude (X) (Format)		084.39569 0000000				<input type="checkbox"/> Hit and Run

Manner of Collision: 1		Location at Area of Impact:		Weather: 1		Surface Condition: 1		Light Condition: 4	
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COLLISION FIELDS

NARRATIVE

Narrative exceeds 9 lines: See Supplement page.



PROPERTY DAMAGE INFORMATION			
Damage Other Than Vehicle:		Owner:	

WITNESS INFORMATION					
Name (Last, First)	Address	City	State	Zip Code	Telephone Number

OCCUPANT INFORMATION										
1	Name (Last, First): SMITH, KUNTA				Address: 165 SAWGRASS DR					
	Age: 41	Sex: M	Unit # 1	Position: 1	Safety Eq: 3	Ejected: 1	Extricated: 2	Air Bag: 1	Injury: 4	Taken for Treatment: N
	Injured Taken To:		By:		EMS Notified (Fatality Only):		EMS Arrival (Fatality Only):		Hospital Arrival (Fatality Only):	
2	Name (Last, First): M. POTTER				Address: 880 CHEROKEE AVE					
	Age:	Sex:	Unit # 2	Position: 1	Safety Eq: 8	Ejected: 1	Extricated: 2	Air Bag: 1	Injury: 3	Taken for Treatment: N
	Injured Taken To:		By:		EMS Notified (Fatality Only):		EMS Arrival (Fatality Only):		Hospital Arrival (Fatality Only):	

ADMINISTRATIVE									
Photos Taken: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		By:		Officer Note: If collision resulted in a fatality, please send prompt notification to the GDOT Crash Reporting Unit via either email at GeorgiaFARS@dot.ga.gov or Fax at (404) 635-2963.					
Report By: 8779		Agency: 01		Report Date: 09/11/2019 0:00		Checked By:		Date Checked:	

P-9-2-3

SUPPLEMENT  
GEORGIA MOTOR VEHICLE CRASH REPORT

Agency Case Number: 192532349 - 00

Estimated Crash Date: 09/10/19 2128

Officer Name: 6779

NARRATIVE CONTINUED

Driver #1 stated they could not remember what happened because they blacked out before the accident. Vehicle #1 sustained heavy front end damage and was impounded by South Metro Towing. The driver complained of pain in their pelvic region as well as in their shoulders. The driver was transported to Grady Memorial Hospital via ambulance.

Driver #2 advised they were driving east on University Ave crossing over the I-75-85 SB EXPY entrance ramp when vehicle #1 attempted to turn left in front of them. Vehicle #2 sustained heavy front end damage including the air bags being deployed in all directions. The driver complained of face and neck pain. Driver #2 was also transported to Grady Memorial Hospital via a difference ambulance. The vehicle was towed away by South Metro Towing.

Driver #1 was cited and arrested for failure to yield while turning left (O.C.G.A. 40-6-71), D.U.I less safe (O.C.G.A. 40-6-391.A1) as well as possession of marijuana less than one ounce (O.C.G.A. 16-13-2B).

END OF REPORT

P-9-3-3

ATLANTA POLICE DEPARTMENT  
Offense Report  
INCIDENT NUMBER: 192532349-01

\*\*\* THIS REPORT INCLUDES RECORDS STILL IN WORKFLOW \*\*\*

----- INCIDENT INFORMATION -----

Report Date: 09/10/2019 Time: 21:28  
Reporting Officer: 6603 (POTTER)  
Officer Making Rpt: 6603 (POTTER)  
Occur/Earliest Date / Time: 09/10/2019 21:28  
Location: 180 UNIVERSITY AVE, ATLANTA, GA 30310  
Latest Poss Date / Time: 09/10/2019 21:28  
Assoc Offense #:  
RD: 302 Beat: 302 Shift: E  
Zone: 03  
Damaged Amount: Stolen Amount: Stolen Amount:  
Disposition: Dispo Date:

----- OFFENSES -----

Offense: 2902 (DAMAGE TO PROP PRIVATE)  
GCIC: 2902 Att/Comp: C UCR: 1400 Vacant Prop: 0

----- OTHER INVOLVED PARTIES -----

Reporting Party #1  
Name: POTTER, MELVIN  
Juvenile?: NO  
Home Address: 880 CHEROKEE AVE  
SSN: DOB: [REDACTED] Sex: M Race: B  
Hgt: Wgt: Hair: Eye:  
Driver's License: State:  
Employer:  
Emp Address:

----- PROPERTY -----

Damaged #1  
Property Tag #:  
Rec Type: DAMAGED  
UCR Type: MISCELLANEOUS Property Type: OTHER  
Brand: Model:  
Description: FRONT FENDER DAMAGE Serial #:  
Quantity: 1  
Owner Applied Number: Damaged Value:  
Rep/Evid/Found Date: 9/10/2019 21:28  
Recover/Found Date:

P-10-1-2



ATLANTA POLICE DEPARTMENT  
Offense Report  
INCIDENT NUMBER: 192532349-01  
\*\*\* THIS REPORT INCLUDES RECORDS STILL IN WORKFLOW \*\*\*

TOTAL VALUE STOLEN: \$0  
TOTAL VALUE RECOVERED: \$0

----- VEHICLE -----

#1  
Date and Time Last Updated: 9/24/2019    Officer Signed ID: 6603  
Record Type:  
Year: 2016                                    Make: FORD                                    Model: INT  
Style: 4D                                    Color 1: BLU                                    Color 2:  
Tag Type:                                    State:                                    License #: GV6594J  
VIN: 1GTCS1458YK250590

Date Reported: 9/10/2019 21:28    Value: 0  
Date Recovered:                                    Value Recovered:  
Registered Owner: CITY OF ATL  
Owner Address: 880 CHEROKEE AVE, ATLANTA, GA

TOTAL VALUE STOLEN: \$0  
TOTAL VALUE RECOVERED: \$0

INCIDENT NARRATIVE

9/10/2019 I was driving my patrol vehicle East on University Ave crossing over its intersection with I-75-85 S entrance ramp. While passing through the intersection vehicle 2 made a left turn failing to yield for oncoming traffic causing the accident. The front of the patrol vehicle sustained extreme damage and the vehicle was immobilized. Nothing further to report at this time.

OFFENSE REPORT REVIEWED BY POTTER, MELVIN ON 9/24/2019

OFFENSE REPORT APPROVED BY

P-10-2-2



# AKINS FORD

P.O. Box 280, 220 West May Street, Winder, GA 30680

Phone: (770) 867-9136

FAX: (770) 307-1382

Workfile ID: 5712b187  
PartsShare: 5yyH7S  
Federal ID: 58-0961275

## Preliminary Estimate

**Customer: City of Atlanta Unit # 32414**

Written By: Eric Trenary

Insured: City of Atlanta Unit # 32414      Policy #:      Claim #:  
Type of Loss:      Date of Loss:      Days to Repair: 0  
Point of Impact:

**Owner:** City of Atlanta Unit # 32414  
**Inspection Location:** AKINS FORD  
P.O. Box 280  
220 West May Street  
Winder, GA 30680  
Repair Facility  
(770) 867-9136 Business  
**Insurance Company:**

## VEHICLE

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

VIN: 1FAHP2MKXEG182753      Interior Color:      Mileage In:      Vehide Out:  
License:      Exterior Color:      Mileage Out:  
State:      Production Date:      Condition:      Job #:

### TRANSMISSION

Automatic Transmission  
4 Wheel Drive

### POWER

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Power Driver Seat  
Power Adjustable Pedals

### DECOR

Dual Mirrors

Tinted Glass

Overhead Console

### CONVENIENCE

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Message Center  
Steering Wheel Touch Controls  
Telescopic Wheel

### RADIO

AM Radio

FM Radio

Stereo

Search/Seek

CD Player

### SAFETY

Drivers Side Air Bag  
Passenger Air Bag  
Anti-Lock Brakes (4)  
4 Wheel Disc Brakes  
Front Side Impact Air Bags  
Head/Curtain Air Bags

### SEATS

Cloth Seats

Bucket Seats

Redining/Lounge Seats

### WHEELS

Styled Steel Wheels

### PAINT

Clear Coat Paint

### OTHER

Traction Control  
Stability Control  
California Emissions

2-11-1-10

**Preliminary Estimate**

**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		<b>FRONT BUMPER</b>					
2		O/H front bumper				2.6	
3	Repl	Bumper cover	EG1Z17D957DPTM	1	607.15	Incl.	3.4
4		Add for Clear Coat					1.4
5	Repl	Bumper grille	EG1Z17K945CA	1	49.89	Incl.	
6	Repl	Absorber	DG1Z17C882A	1	105.70	Incl.	
7	Repl	Impact bar	DG1Z17757A	1	216.00	0.8	
8	Repl	Bracket to 11/03/2014	DG1Z17N775A	2	277.90		
9	#	Repl Push Bar		1	337.00 X	3.0	
10	#	Repl Strobes		1	126.00 X	1.5	
11		<b>GRILLE</b>					
12	Repl	Grille	DG1Z8200AA	1	165.42	Incl.	
13	Repl	Sight shield	DG1Z8A284AA	1	60.40	Incl.	
14		<b>FRONT LAMPS</b>					
15	Repl	RT Headlamp housing	DG1Z13008N	1	653.94	Incl.	
16		Aim headlamps				0.5	
17	Repl	LT Headlamp housing	DG1Z13008P	1	637.94	Incl.	
18	Repl	Siren	DG1Z19G403A	1	472.63		
19		<b>RADIATOR SUPPORT</b>					
20	Repl	Radiator support	DG1Z16138A	1	222.26	7.0	
21		Evacuate & recharge				m 1.4	M
22		Refrigerant recovery				m 0.4	M
23	Repl	RT Shield	DG1Z8310A	1	7.62		
24	Repl	LT Shield	DG1Z8310A	1	7.62		
25	Repl	LT Inner shield	DG1Z8311A	1	30.05	0.2	
26	Repl	RT Inner shield	DG1Z8310B	1	25.35	0.2	
27	Repl	LT Side air baffle	DG1Z8311J	1	162.15	0.2	
28	Repl	RT Side air baffle	DG1Z8310J	1	138.36	0.2	
29	Repl	Lower deflector	DG1Z8327A	1	106.73	Incl.	
30		<b>COOLING</b>					
31	Repl	Radiator	DG1Z8005D	1	331.97 m	Incl.	
32	Repl	Fan assy	DG1Z8C607E	1	255.73 m	Incl.	
33		<b>AIR CONDITIONER &amp; HEATER</b>					
34	Repl	Condenser	DG1Z19712B	1	362.18 m	3.5	M
35		<b>HOOD</b>					
36	Repl	Hood	DG1Z16612A	1	1,178.40	1.4	3.0
37		Add for Clear Coat					1.2
38		Add for Underside(Complete)					1.5
39	Repl	LT Hinge	AG1Z16797A	1	23.17	0.3	0.3
40		Add for Clear Coat					0.1
41	Repl	RT Hinge	AG1Z16796A	1	26.53	0.3	0.3
42		Add for Clear Coat					0.1
43	Repl	Striker	8A5Z16K689A	1	20.61	Incl.	

P-11-2-10

**Preliminary Estimate**

**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

44	Repl	Latch	AG1Z16700A	1	56.03	Incl.	
45	Repl	Front w'strip 3.7 liter	DG1Z16B990A	1	41.76	Incl.	
46	Repl	Rear seal	8A5Z16740A	1	23.62	Incl.	
47	Repl	RT Side seal	AG1Z16A238A	1	20.84		
48	Repl	LT Side seal	AG1Z16A238A	1	20.84		
49	<b>FENDER</b>						
50	Repl	RT Fender	DG1Z16005B	1	325.49	1.8	2.0
51		Overlap Major Adj. Panel					-0.4
52		Add for Clear Coat					0.3
53		Add for Edging					0.5
54	Repl	LT Fender	DG1Z16006B	1	323.45	1.8	2.0
55		Overlap Major Adj. Panel					-0.4
56		Add for Clear Coat					0.3
57		Add for Edging					0.5
58	Repl	LT Fender liner	BG1Z16103A	1	51.03	Incl.	
59	Repl	LT Front bracket	DG1Z16A143B	1	26.46	0.2	
60	*	R&I RT Nameplate w/flasher lamp				0.2	
61	*	R&I LT Nameplate w/flasher lamp				0.2	
62	Repl	LT Upper rail	DG1Z16155A	1	93.12 s	4.0	1.0
63	#	Rpr Rewire Strobes				1.0	
64	Repl	LT Upper reinf	8G1Z16B045B	1	105.46 s	2.5	0.5
65		Overlap Minor Panel					-0.2
66	Repl	LT Front reinf (HSS)	8G1Z54101A03A	1	69.09 s	3.0	0.4
67		Add for Clear Coat					0.1
68	Repl	LT Front panel (HSS)	DG1Z16055A	1	33.13 s	2.5	0.6
69		Overlap Minor Panel					-0.2
70	<b>ELECTRICAL</b>						
71	Repl	Battery 850 amp	BXT6S850	1	139.95 m	0.3 M	
72	Repl	Battery tray	AG1Z10732D	1	69.58	0.2	
73	<b>ENGINE</b>						
74	Repl	Upper cover	AG1Z9661A	1	34.38 m	Incl.	
75	Repl	Filter element	7T4Z9601A	1	21.95	Incl.	
76	Repl	Air mass sensor	BR3Z12B579A	1	136.56 m	0.1 M	
77	Repl	Lower tray	AA5Z9A600B	1	76.67 m	0.6 M	
78	Repl	Air inlet assy	DA8Z9B659A	1	92.38 m	0.2 M	
79	Repl	Mount bracket	BB5Z9647A	1	14.33	0.1	
80	<b>STEERING WHEEL</b>						
81	R&I	Steering wheel w/o SYNC				Incl.	
82	<b>WINDSHIELD</b>						
83	Repl	Windshield FORD w/o rain sensor	FG1Z5403100A	1	277.32	3.3	
84	R&I	RT Wiper arm				Incl.	
85	#	3M Window Urethane Kit		1	14.23 X	0.5	
86	R&I	LT Wiper arm				Incl.	
87	<b>COWL</b>						
88	R&I	Cowl grille				0.8	

P-11-3-10



**Preliminary Estimate**

**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

89	<b>CONSOLE</b>							
90		R&I	R&I console assy					0.7
91	*	R&I	RT Upper panel					0.2
92	*	R&I	LT Upper panel					0.2
93	*	R&I	Rear panel					0.2
94	<b>RESTRAINT SYSTEMS</b>							
95		Repl	Driver air bag all	DG1Z78043B13AA	1	377.09	m	Incl.
96			Air bag system diagnosis ck system operation				m	0.5 M
97			Air bag system diagnosis pinpoint test				m	2.1 M
98		Repl	LT Head air bag from 12/01/2009	DG1Z54042D95A	1	360.33	m	0.6 M
99		Repl	LT Ft seat air bag manual pass. seat	BG1Z54611D11A	1	281.00	m	0.5 M
100		Repl	Clockspring all, w/o heated steering wheel	GB5Z14A664C	1	258.74	m	1.0 M
101		Repl	Diagnostic unit from 05/04/2010 to 11/09/2013	BG1Z14B321A	1	570.88	m	0.5 M
102		Repl	RT Ft impact sensor	BK2Z14B004A	1	86.50	m	0.3 M
103		Repl	LT Ft impact sensor	BK2Z14B004A	1	86.50	m	0.3 M
104		Repl	LT Side impact sens front	GN1Z14B345A	1	43.88	m	0.3 M
105		Repl	LT Side impact sens rear	BK2Z14B004A	1	86.50	m	0.3 M
106		Repl	LT Seat belt assy charcoal black	DG1Z54611B09AC	1	253.13		0.7
107		Repl	LT Tensioner charcoal black	DG1Z54610E45AF	1	128.33		
108	<b>SEATS &amp; TRACKS</b>							
109		R&I	LT R&I front seat					0.5
110		Repl	LT Seat back cover cloth/vinyl charcoal	DG1Z5464417PA	1	410.72		1.3
111		Repl	LT Seat back pad	DB5Z7864811P	1	184.43		
112	<b>ROOF</b>							
113		Repl	Headliner w/o SYNC	DG1Z5451916CF	1	2,053.44		2.9
114		R&I	LT Roof molding					0.4
115	#	Blnd	LT Roof Rail					1.0
116	#	R&I	Bar Light					0.5
117	<b>REAR DOOR</b>							
118		Repl	LT Door shell	BG1Z5424631A	1	684.82		5.0
119			Overlap Major Non-Adj. Panel					-0.2
120	*		Add for Clear Coat					0.6
121		Repl	LT Side molding	AG1Z5425557AA	1	55.08		0.3
122		Repl	LT Upper molding	AG1Z54255A61B	1	106.36		0.3
123		Repl	LT Rear molding	DG1Z54255A63AA	1	26.95		0.5
124		Repl	LT Belt w/strip	AG1Z5425597A	1	129.80		Incl.
125		Repl	LT Applique	BG1Z54255A35AA	1	52.32		Incl.
126		Repl	LT Door glass FORD	AG1Z5425713A	1	187.95		Incl.
127		Repl	LT Run channel	AG1Z5425767C	1	251.59		Incl.
128	<b>BACK GLASS</b>							

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Preliminary Estimate

Customer: City of Atlanta Unit # 32414

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

129	R&I	Back glass FORD				Incl.	
130 #		3M Window Urethane Kit		1	14.23 X	0.5	
131	<b>QUARTER PANEL</b>						
132	Repl	LT Quarter panel	AG1Z5427841A	1	1,239.27	17.0	3.0
133		Overlap Major Adj. Panel					-0.4
134 *		Add for Clear Coat					0.5
135	R&I	LT Wheelhouse liner				Incl.	
136	Repl	LT Upper molding w/o SHO	AG1Z5428167A	1	92.81	0.2	
137	Repl	LT Lower molding	AG1Z5429077AB	1	115.63	0.2	0.3
138 *		Add for Clear Coat					0.1
139 *	Rpr	LT Inner panel				6.0	1.6
140 *		Add for Clear Coat					0.3
141	Repl	LT Lock plr reinf	8A5Z5428409A	1	60.82	2.5	0.5
142		Overlap Minor Panel					-0.2
143	<b>TRUNK LID</b>						
144 *	Rpr	Trunk lid all w/o spoiler				2.0	2.3
145		Overlap Major Adj. Panel					-0.4
146 *		Add for Clear Coat					0.4
147	Repl	Nameplate "TAURUS"	AG1Z5442528A	1	20.73	0.3	
148	Repl	Nameplate "POLICE INTERCEPTOR"	XW7Z5442528AC	1	24.86	0.2	
149	Repl	Nameplate "AWD"	5F9Z7442528EA	1	29.44	0.2	
150	R&I	Applique panel w/o camera				0.5	
151	R&I	Trunk lid trim				0.3	
152	R&I	Trunk lock w/Police				0.3	
153	<b>REAR LAMPS</b>						
154	Repl	LT Tail lamp assy w/o special service	DG1Z13405CC	1	176.31	Incl.	
155	R&I	RT Tail lamp assy w/o special service				0.4	
156	Repl	LT Backup lamp	DG1Z13405M	1	166.76	0.3	
157	R&I	RT Backup lamp				0.3	
158	<b>REAR BUMPER</b>						
159	R&I	R&I bumper cover				Incl.	
160 #	Rpr	Rewire Strobes				1.0	
161 #	Rpr	SET UP				2.0	
162 #	Rpr	PULL & ALIGN UNIBODY				4.0	F
163 #		Flex Additive		1	10.00 X		
164 #		Hazardous Waste		1	5.00 X		
165 #		Liquid Mask for Overspray		1	10.00 X		
166 #		Corrossion Protection		1	15.00 X	0.5	
167 #	Rpr	Reset Air Bag Light				1.0	M
168 #		3M Panel Bond Adhesive		1	59.95 X	0.5	
169 #		3M Heavy Body Seam Sealer		1	59.95 X	0.5	
170 #		4 Wheel Alignment		1	69.95 X		M
171 #	Repl	Cavity Wax		1	19.95 X	0.2	

**Preliminary Estimate**

**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

172	#	Refn	MASK FOR PRIME					0.5
173	#	Refn	FEATHER PRIME AND BLOCK PER PANEL					0.8
174	#	Repl	R134 Freon Per LB	2	31.04	X	M	
175	#	Repl	Decals	1	425.65	X	1.0	1.0
<b>SUBTOTALS</b>					<b>18,000.06</b>		<b>108.8</b>	<b>33.3</b>

**ESTIMATE TOTALS**

Category	Basis	Rate	Cost \$
Parts			16,802.11
Parts Discount	\$ 16,367.88	-31.0 %	-5,074.04
Glass Discount	\$ 465.27	-31.0 %	-144.23
Body Labor	90.9 hrs @	\$ 44.00 /hr	3,999.60
Paint Labor	33.3 hrs @	\$ 44.00 /hr	1,465.20
Mechanical Labor	13.9 hrs @	\$ 60.00 /hr	834.00
Frame Labor	4.0 hrs @	\$ 60.00 /hr	240.00
Paint Supplies	33.3 hrs @	\$ 30.00 /hr	999.00
Miscellaneous			1,197.95
Subtotal			20,319.59
<b>Grand Total</b>			<b>20,319.59</b>
Deductible			0.00
<b>CUSTOMER PAY</b>			<b>0.00</b>
<b>INSURANCE PAY</b>			<b>20,319.59</b>

**MyPriceLink Estimate ID / Quote ID:**

601478369858560000 / 54658233

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**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

A/M- THIS ABBREVIATION FOR "AFTERMARKET PARTS" INDICATES PARTS MADE BY A MANUFACTURER OTHER THAN THE ORIGINAL VEHICLE MANUFACTURER. THESE PARTS ARE WARRANTED BY THE MANUFACTURER OF THE SAID PART OR THEIR DISTRIBUTOR. THERE ARE TWO LEVELS OF AFTERMARKET PARTS-ONE BEING "CERTIFIED" AND THE OTHER "NON CERTIFIED"

BLEND-A PROCESS OF GRADUALLY BLENDING THE PAINT INTO THE ADJACENT PANEL BEING REPLACED OR REPAIRED TO FACILITATE AN ACCEPTABLE COLOR MATCH.

CAPA- THIS ABBREVIATION IS FOR "CERTIFIED AUTOMOTIVE PARTS ASSOCIATION"- CAPA PARTS ARE AFTERMARKET PARTS CERTIFIED BY AN UNBIASED THIRD PARTY THAT INSURES THE QUALITY OF THE PARTS THEY TEST ARE EQUAL TO OR GREATER THAN THE ORIGINAL CAR COMPANY PART.

COLOR SAND AND BUFF- PROCESS OF SANDING A REPAINTED SURFACE WITH ULTRA FINE SANDPAPER TO REMOVE MINOR SURFACE IMPERFECTIONS IN THE PAINT, OR TO ACHIEVE THE SAME TEXTURE OF THE PAINT FINISH AS THE REST OF THE VEHICLE. AFTER SANDING THE REPAINTED PARTS, THEY ARE THEN BUFFED TO RESTORE ORIGINAL GLOSS. THIS PROCESS MAY ALSO BE REFERRED TO AS "DENIB AND BUFF", OR "FINESSING"/

COMPETITIVE PARTS- ANOTHER TERM FOR AFTERMARKET PARTS

LKQ- LIKE, KIND AND QUALITY-MEANING USED PARTS FROM SALVAGE VEHICLE OF THE SAME MAKE AND MODEL, USUALLY FROM THE SAME YEAR OR NEWER THAN THE VEHICLE BEING REPAIRED WITH COMPARABLE OR LESS MILAGE THAN THE VEHICLE IT IS BEING USED FOR.

OEM-THE ABBREVIATION "OEM" IMPLIES THAT THE PART OR PARTS ARE MADE BY THE ORIGINAL CAR COMPANY MANUFACTURER OR ITS LICENSED SUPPLIER AND IS A GENUINE NEW PART WARRANTED BY THE VEHICLE MANUFACTURER.

O/H- OVER HAUL- REMOVE AN ASSEMBLY, DISASSEMBLE,CLEAN AND VISUALLY INSPECT IT, REPLACE NEEDED PARTS, REASSEMBLE AND REINSTALL ON THE VEHICLE MAKING ANY NECESSARY ADJUSTMENTS.

PDR-PAINTLESS DENT REPAIR- THE PROCESS USING SPECIALTY TOOLS TO REMOVE MINOR, ROUNDED DENTS, SUCH AS HAIL DAMAGE DENTS, WITHOUT DAMAGING THE PAINT.

QRP- QUALITY REPLACEMENT PART, ANOTHER TERM FOR AFTERMARKET PARTS.

RECYCLED-USED PARTS FROM A SALVAGE VEHICLE THAT RE-ENTERS COMMERCE WHEN SOLD TO A REPAIR SHOP. THE REPAIRER THEN TAKES THE USED COMPONENT AND PERFORMS THE NECESSARY STEPS TO PUT IT IN A RECYCLED CONDITION THAT WILL THEN BE UTILIZED IN THE REPAIR PROCESS.

REMANUFACTURED PART- REMAN PART- A USED, ORIGINAL FACTORY PART THAT HAS BEEN REFURBISHED TO NEW CONDITION. (THIS COULD BE AN ORIGINAL CAR COMPANY (OEM) PART OR AN AFTERMARKET SUPPLIER.) THIS PROCEDURE COULD BE PERFORMED BY AN ORIGINAL CAR COMPANY SUPPLIER OR A LICENSED AFERMARKET SUPPLIER FOR THE CAR COMPANY.

REBUILT PART- A REBUILT PART MAY NOT BE AN ORIGINAL CAR COMPANY PART; IT COULD BE AN AFTERMARKET SUPPLIED PART. THIS IS A PART THAT IS BEING REPAIRED AND SERVICED FOR THE PURPOSE OF RESALE. REBUILT PARTS ARE TYPICALLY SUPPLIED BY AN AFTERMARKET SOURCE.

R & I-REMOVE AND INSTALL- USUALLY REFERRING TO PARTS BEING REMOVED FROM A VEHICLE TO FACILITATE REPAIRS OR TO ALLOW ACCESS. THE SAME PART IS THEN REINSTALLED ON THE SAME VEHICLE IT WAS REMOVED FROM.

R&R-REMOVE AND REPLACE- THIS ABBREVIATION MEANS THAT A PART IS BEING REMOVED AND REPLACED WITH

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**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

A NEW, RECYCLED OR AFTERMARKET PART.

STRIPING- THIS IS THE MOST COMMON PROBLEM ENCOUNTERED WHEN SPRAYING METALLIC. GENERALLY CAUSED BY ONE OF THREE THINGS: INSUFFICIENT OVERLAP BETWEEN COATS LEADING TO A "DRY EDGE", OR USING CHEAP THINNERS WHICH FLASH-OFF AT THE WRONG SPEED FOR THE PAINT OR POOR GUN TECHNIQUE.

TINT-MEANS TIME SPENT BY A PAINTER TO TINT THE COLOR TO ACHEIVE AN ACCEPTABLE PAINT MATCH.

NOTICE TO THIRD PARTY CLAIMANTS: Failure to use the insurance proceeds in accordance with a security agreement between you and a lienholder, if any, may be a violation of Code Section 16-8-4 of the O.C.G.A. If you have any questions, contact your lending institution.

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**Customer: City of Atlanta Unit # 32414**

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide DR2JN10, CCC Data Date 09/10/2019, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (\*) or Double Asterisk (\*\*) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2020 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

**SYMBOLS FOLLOWING PART PRICE:**

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

**SYMBOLS FOLLOWING LABOR:**

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

**OTHER SYMBOLS AND ABBREVIATIONS:**

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Information Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

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Preliminary Estimate

Customer: City of Atlanta Unit # 32414

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

RECALL INFO

2014 FORD Police Interceptor AWD (Fleet) 4D SED 6-3.7L Gasoline Sequential MPI

VIN: 1FAHP2MKXEG182753	Interior Color:	Mileage In:	Vehicle Out:
License:	Exterior Color:	Mileage Out:	
State:	Production Date:	Condition:	Job #:

The National Highway Transportation and Safety Administration (NHTSA) has issued 1 safety-related recall notice(s) that may apply to the selected vehicle.

<b>NHTSA ID: 16V621000</b>	<b>Issued: Aug 8, 16</b>	<b>Number of Vehicles: 00077502</b>
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FUEL SYSTEM, GASOLINE Ford Motor Company (Ford) is recalling certain model year 2013-2015 Ford Taurus, Ford Flex, Lincoln MKS and Lincoln MKT vehicles equipped with 3.5L GTDI Ecoboost engines and 2013-2015 Ford Taurus Police Interceptor vehicles. A component within the fuel pump electric module (PEM) may overheat causing a loss of electrical power to the fuel pump. A loss of power to the fuel pump will cause the engine to stall or prevent the vehicle from starting, increasing the risk of a crash Ford will notify owners, and dealers will inspect the fuel PEM part number and replace the fuel PEM, as necessary, free of charge. The recall began on December 1, 2016. Owners may contact Ford customer service at 1-866-436-7332. Ford's number for this recall is 16S31.

P-11-10-10

## ATLANTA POLICE DEPARTMENT INVESTIGATION DISPOSITION FORM

EMPLOYEE: Potter, Melvin

OPS CONTROL #: 19-I-0587-VA

**I. FINDING OF FACT:** (LIST FACTS IN SIMPLE SENTENCES; DO NOT INCLUDE DISCIPLINARY ACTION RECOMMENDATIONS.)

- On 09/10/2019 around 2128hrs Off. M. Potter operating vehicle #33414 was traveling East Bound on University Ave at I-75-85 Ramp SW.
- Mr. Kunta Smith was traveling Westbound on University turning South bound on to I-75-85 Ramp SW operating his White GMC Pickup truck.
- Mr. Smith made a left turn from University Ave striking Off. Potter (Unit 3302) causing major front-end damage of the patrol vehicle.
- All airbags were deployed because of the accident. Officer Potter and Mr. Smith sustained injuries because of the accident.
- Mr. Smith and Officer Potter were transported to Grady Hospital.
- Mr. Smith admitted to Officer Tabor that on a scale from 1 to 10 of the level of his intoxication was an 8. Mr. Smith was placed under arrest, was charged accordingly, and was transported to Grady Detention by Officer D. Tabor.
- Mr. Smith was found to be at fault of the accident.

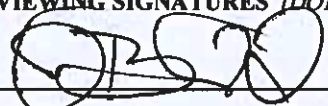

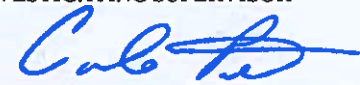
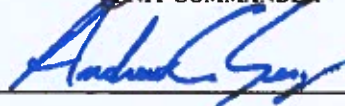
**II. PROCEDURE, POLICY OR TRAINING RECOMMENDATIONS:** (DO NOT RECOMMEND DISCIPLINARY ACTION)

No recommendations

**III. INVESTIGATIVE DISPOSITION** (INDICATE RECOMMENDED DISPOSITION FOR EACH WORK RULE)

RULE <u>4.4.4</u>	SUSTAINED <input type="checkbox"/>	NOT SUSTAINED <input type="checkbox"/>	EXONERATED <input checked="" type="checkbox"/>	UNFOUNDED <input type="checkbox"/>	EXCEPTIONALLY CLOSED <input type="checkbox"/>
RULE _____	SUSTAINED <input type="checkbox"/>	NOT SUSTAINED <input type="checkbox"/>	EXONERATED <input type="checkbox"/>	UNFOUNDED <input type="checkbox"/>	EXCEPTIONALLY CLOSED <input type="checkbox"/>
RULE _____	SUSTAINED <input type="checkbox"/>	NOT SUSTAINED <input type="checkbox"/>	EXONERATED <input type="checkbox"/>	UNFOUNDED <input type="checkbox"/>	EXCEPTIONALLY CLOSED <input type="checkbox"/>
RULE _____	SUSTAINED <input type="checkbox"/>	NOT SUSTAINED <input type="checkbox"/>	EXONERATED <input type="checkbox"/>	UNFOUNDED <input type="checkbox"/>	EXCEPTIONALLY CLOSED <input type="checkbox"/>

**IV. REVIEWING SIGNATURES** (DOES NOT INDICATE AGREEMENT)

<p> _____ INVESTIGATING SUPERVISOR</p> <p><u>10/25/19</u> DATE</p>	<p> _____ UNIT COMMANDER</p> <p><u>10-26-19</u> DATE</p>
<p> _____ ASSISTANT SECTION COMMANDER</p> <p><u>10-31-19</u> DATE</p>	<p> _____ SECTION COMMANDER</p> <p><u>10/30/2019</u> DATE</p>


0-12-1-1

**OPS FILE TRACKING LOG / OPS#**

**19-I-0587-VA**

**EMPLOYEE:**

**OFFICER MELVIN POTTER**

DATE RECEIVED	RECEIVED BY	DATE FORWARDED	FORWARDED TO	SUPERVISORS SIGNATURE
10/30/19	MAST. SENSER	10/31/2019	SGT. MISTODWA	

Pursuant to APD.SOP.2020-§4.2.2 (5, 6, 7) Supervisors should maintain a log of complaint files and ensure that no investigation remains overdue without cause. The investigating supervisor will report the status of the investigation to his or her supervisor every seven calendar days. If the investigation extends beyond 14 days, the OPS commander must be notified.

If the investigation extends beyond 60 days, the investigating supervisor must notify the complainant of the status of the investigation and document the notification.

**The investigation should be completed within 90 days.** If the investigator cannot complete it within 90 days, he or she will send a memo through the chain of command to the OPS commander and to the accused employee specifying the reason for the delay. This documentation will become a part of the investigative file.





Atlanta Police Department

**MEMORANDUM**

**TO:** Officer Melvin Potter  
**FROM:** Major C. Tyus  
**DATE:** December 17, 2019  
**RE:** Disposition OPS Complaint File: 19-I-0587-VA

An investigation has been completed into the complaint filed against you alleging misconduct. The complaint has been closed as indicated below:

- Exonerated - your conduct was determined to be justified, lawful and Proper in the complaint with regards to employee Work Rule 4.4.4 OPERATION OF CITY VEHICLES USED FOR LE PURPOSES
- Not-Sustained - the investigation did not develop sufficient information to prove or disprove the allegation stated in the complaint with regards to employee Work Rule
- Sustained - the investigation did develop sufficient information to prove the allegation stated in the complaint with regards to employee Work Rule
- Unfounded - the allegation was without factual basis Work Rule

CT/cd  
cc: File