

NORTH CHARLESTON POLICE  
SC0100800

## INCIDENT REPORT

INFORMATION  
ONLY  
CASE NUMBER  
2024031155NCIC  
INQ.  
No  
ENTD.  
No

|   |  |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
|---|--|---|------------------------------|---|-----------------------|--|--|---|---|---|--------------------|---|--|--|--|--|---|---------------------|-------------|
| EVENT   | INCIDENT TYPE  |   |                              |   |                       |  | COMPLETED  |   | FORCED ENTRY  |   | PREMISE TYPE       |   |  | UNITS ENTERED  |  | TYPE VICTIM  |   |                     |             |
|   | 1. OTHER: TRAFFIC OFFENSE TRAFFIC OFFENSE  |   |                              |   |                       |  | <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO  |   | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |   | HIGHWAY/ROAD/ALLEY |   |  |  |  | <input type="checkbox"/> Individual                                    |   |                     |             |
|   | 2.   |   |                              |   |                       |  | <input type="checkbox"/> YES <input type="checkbox"/> NO   |   | <input type="checkbox"/> YES <input type="checkbox"/> NO            |   |                    |   |  |  |  | <input type="checkbox"/> Business                                      |   |                     |             |
| 3.  |  |   |                              |   |                       | <input type="checkbox"/> YES <input type="checkbox"/> NO   |  | <input type="checkbox"/> YES <input type="checkbox"/> NO              |   |   |                    |   |  |  | <input type="checkbox"/> Financial Inst.   |  |   |                     |             |
| INCIDENT LOCATION (SUBDIVISION, APARTMENT AND NUMBER, STREET NAME AND NUMBER)<br>Rivers Av / Northwoods Blvd, NORTH CHARLESTON, SC  |  |   |                              |   |                       |  |  |   |   |   |                    |   | ZIP CODE<br>29406                                  |  | WEAPON TYPE  |  |   |                     |             |
| INCIDENT DATE<br>12/06/2024   |  | 24 HR. CLOCK<br>15:43   |                              | TO  | DATE<br>12/06/2024    | 24 HR. CLOCK<br>16:05  |  | DISPATCH DATE/TIME 24 HR. CLOCK<br>12/06/2024 15:43                   |   |   |                    | TIME ARRIVED<br>15:43   |  | DEPART. TIME   |  | LOCATION NO.<br>8  |   |                     |             |
| COMPLAINANT'S NAME (LAST, FIRST, MIDDLE)<br>SOCIETY 1   |  |   |                              |   |                       | RELATIONSHIP TO SUBJECT<br>#1 #2 #3  |  |   | RESIDENT  | RACE  | SEX                | AGE /   | ETH  | DAYTIME PHONE<br><input type="checkbox"/> H <input type="checkbox"/> B |  | EVENING PHONE<br><input type="checkbox"/> H <input type="checkbox"/> B |   |                     |             |
| ADDRESS   |  |   |                              |   |                       | CITY   |  |   | STATE   |   | ZIP CODE           |   | LOCATION NO.                                       |  |  |  |   |                     |             |
| VICTIM'S NAME (LAST, FIRST, MIDDLE)<br>SOCIETY 1  |  |   |                              |   |                       | RELATIONSHIP TO SUBJECT<br>#1 #2 #3  |  |   | RESIDENT  | RACE  | SEX                | AGE /   | ETH  | DAYTIME PHONE<br><input type="checkbox"/> H <input type="checkbox"/> B |  | EVENING PHONE<br><input type="checkbox"/> H <input type="checkbox"/> B |   |                     |             |
| HEIGHT WEIGHT HAIR EYES   |  |   |                              |   |                       | FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.   |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
| ADDRESS<br>2500 CITY HALL LANE  |  |   |                              |   |                       | CITY<br>N CHARLESTON   |  |   | STATE<br>SC   |   | ZIP CODE<br>29405  |   | LOCATION NO.                                       |  |  |  |   |                     |             |
| VISIBLE INJURY(MCT:1) <input type="checkbox"/> YES NO <input type="checkbox"/> EXPLAIN-   |  |   |                              |   |                       | COMPLAINT OF ANY NON-VISIBLE INJURIES: <input type="checkbox"/> YES NO <input type="checkbox"/>  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
| VICTIM(No.1) USING:<br>ALCOHOL <input type="checkbox"/> YES NO <input type="checkbox"/> UNK. <input type="checkbox"/> DRUGS: <input type="checkbox"/> YES NO <input type="checkbox"/> UNK. <input type="checkbox"/> TYPE: |  |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
| TWO/MANVEH <input type="checkbox"/> ONE/MANVEH. <input type="checkbox"/> DETECTIVE/PLASMT. <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.   | <input checked="" type="checkbox"/> SUSPECT<br><input type="checkbox"/> RUNAWAY<br><input type="checkbox"/> WANTED<br><input type="checkbox"/> WARRANT<br><input type="checkbox"/> ARREST<br><input type="checkbox"/> JAIL<br><input type="checkbox"/> SUMMONS |   |                              |   |                       |  | NAME (LAST, FIRST, MIDDLE)<br>SMITH, RONALD, ROBERT  |   |   | RACE<br>B   | SEX<br>M           | AGE<br>42 /   | ETH.<br>N  | DATE OF BIRTH<br>[REDACTED]  |  | HEIGHT<br>511  | WEIGHT<br>190   | HAIR<br>BLK         | EYES<br>BRO |
|   |  |   |                              |   |                       |  | FACIAL HAIR, SCARS, TATTOOS, GLASSES, CLOTHING, PHYSICAL PECULIARITIES, ETC.<br>, SCAR/Abdomen   |   |   | RELATED OFFENSE(S)<br>TRA   |                    |   |  | DAYTIME PHONE<br><input type="checkbox"/> H <input type="checkbox"/> B |  | EVENING PHONE<br><input type="checkbox"/> H <input type="checkbox"/> B |   |                     |             |
|   |  |   |                              |   |                       |  | ADDRESS<br>[REDACTED]  |   |   | CITY<br>[REDACTED]  |                    | STATE<br>[REDACTED]   | ZIP CODE<br>[REDACTED]                             |  | LOCATION NO.   |  |   |                     |             |
|   |  |   |                              |   |                       |  | SUBJECT(No.1) USING: ALCOHOL <input type="checkbox"/> YES NO <input type="checkbox"/> UNK. <input type="checkbox"/> DRUGS: <input type="checkbox"/> YES NO <input type="checkbox"/> UNK. <input type="checkbox"/> TYPE:<br>TOTAL # ARRESTED  |   |   | ARRESTED NEAR OFFENSE SCENE <input type="checkbox"/> YES NO <input type="checkbox"/>                  |                    |   |  | DATE/TIME OF OFFENSE<br>12/6/2024 3:43:00 PM                           |  |  |   | DATE/TIME OF ARREST |             |
|   |  |   |                              |   |                       |  | DAY OF THE WEEK<br>S M T W T F S UNK   |   |   | HOW REPORTED<br>A= OFFICER DISPATCHED ON CALL<br>B= REPORT TAKEN BY PHONE<br>C= COMPLAINANT WALKED IN |                    | D= COMPLAINT WRITTEN IN<br>E= OFFICER INITIATED<br>F= OTHER                                 |  | DIFF. FACTOR   | A= RESISTANCE/HOSTILITY<br>B= WEAPONS<br>C= UNFOUNDED CALLS<br>D= MENTAL SUBJECT |  | E= COMPLAINANT FREQUENTLY INTOXICATED<br>F= DOMESTIC<br>N= NORMAL |                     |             |
|   |  |   |                              |   |                       |  | Bloomer 217 Narrative<br><br>On 12/6/2024 at approximately 1543 hours, I Ptl. Bloomer was in the area of Northwoods Blvd and Rivers Ave which is located within the City of North Charleston, County of Charleston, State of South Carolina. I observed a black Chevrolet Silverado with SC dealer tag X687627 operating with front window tint that was unlawful, it was too dark to see into and had no compliance decal as required by statute; the vehicle also had a heavily tinted front windshield. Until the windows were rolled down you could not see inside the vehicle at all. |   |   |   |                    |   |  |  |  |  |   |                     |             |
|   |  |   |                              |   |                       |  | As we turned from Northwoods onto Rivers Ave Westbound I activated my emergency equipment to include several siren activations. The Suspect slowly moved to the far-right lane, skipped a safe place to pull over at the entrance to Hobby Lobby, and continued to drive   |   |   |   |                    |   |  |  |  |  |   |                     |             |
| NARRATIVE   |  |   |                              |   |                       |  | JURISDICTION OF THEFT<br>LAW ENFORCEMENT AGENCY  |   |   |   |                    |   | JURISDICTION OF RECOVERY<br>LAW ENFORCEMENT AGENCY |  |  |  |   |                     |             |
|   | TYPE(GROUP)  |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  | TOTAL VALUE   |                     |             |
|   | STOLEN   |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
|   | DAMAGED  |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
|   | BURNED   |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
|   | RECOVERED  |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
|   | SEIZED   |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
| SUBJECT IDENTIFIED<br><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>  |  | SUBJECT LOCATED<br><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |                              | S. F. <input type="checkbox"/>                            |                       | <input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> ADM. <input type="checkbox"/> CLOSED<br><input type="checkbox"/> UNFOUNDED |  | ARRESTED UNDER 18<br><input type="checkbox"/><br>ARRESTED 18 AND OVER |   |   |                    | <input type="checkbox"/> EX-CLEAR UNDER 18<br><input type="checkbox"/> EX-CLEAR 18 AND OVER |  |  |  |  |   |                     |             |
| REASON FOR EXCEPTIONAL<br>CLEARANCE   |  | 1. <input type="checkbox"/> OFFENDER DEATH. 2 <input type="checkbox"/> NO PROSECUTION<br>PROSECUTION            |                              | 3. <input type="checkbox"/> EXTRADITION DENIED<br>DENIED. |                       | 4. <input type="checkbox"/> VICTIM DECLINES<br>COOPERATION   |  | 5. <input type="checkbox"/> JUVENILE-NO CUSTODY                       |   |   |                    |   |  |  |  |  |   |                     |             |
| REPORTING OFFICER(S)<br>Bloomer, Jacob 217  |  |   | DATE<br>12/6/2024 3:43:00 PM |   | UNIT<br>NUMBER<br>217 | APPROVING OFFICER  |  |   |   | DATE  |                    | UNIT<br>NUMBER  |  |  |  |  |   |                     |             |
|   |  |   |                              |   |                       |  |  |   |   |   |                    |   |  |  |  |  |   |                     |             |
|   |  |   |                              |   |                       | FOLLOW-UP<br>INVESTIGATION<br><input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                     |  |   |   | OFFICER   |                    |   |  |  |  |  |   |                     |             |

## ADDITIONAL NARRATIVE

|  |                     |                                 |       |                      |
|--|---------------------|---------------------------------|-------|----------------------|
| Agency Name:<br>NORTH CHARLESTON POLICE DEPARTMENT | ORI #:<br>SC0100800 | Report Date/Time:<br>12/06/2024 | 15:43 | OCA #:<br>2024031155 |
|--|---------------------|---------------------------------|-------|----------------------|

### Bloomer 217 Narrative

approximately 0.5 miles down Rivers Ave before turning right into the entrance of 8096 Rivers and placing the vehicle in park.

After stopping, I approached the vehicle from the passenger side, I requested the Suspect, who was the driver and sole occupant, roll all the windows down due to being unable to see through the window tint. Upon making contact, the Suspect tried talking over me several times while attempting to introduce myself and provide the reason for the traffic stop.

The Suspect became verbally challenging to why I was looking in the vehicle after I asked him about the presence of any weapons. This was abnormal behavior for the typical traffic stop and raised concern about the truthfulness of the Suspect's delayed answer about weapons presence. I received the requested identifying information to include an insurance card and registration for the Dealer tag that was on the vehicle.

I then requested the Suspect exit the vehicle and stand at the front of my patrol vehicle. This was due to his demeanor, possible weapons presence, and officer safety while I checked the VIN of the vehicle located in the driver door jamb. Once at my vehicle, the Suspect argued the reasoning as to why he was removed from the vehicle stating there was no probable cause to do so. I informed him of the proper information and then continued with my VIN check. While doing the check, the Suspect tried to be demeaning in a way as if I was performing the actions I was doing because I was racist making statements such as, "Do it look like I'm a goddamn criminal? If a white man was driving this vehicle, you wouldn't pull him out the vehicle." I again informed him I removed and was not going to have him hovering over me in an unsafe position while I performed the VIN check.

I returned to my vehicle and began performing normal NCIC inquiries. The Suspect's SCDL returned clear. The dealer tag returned to S & F Top Quality Auto Sales LLC. The VIN [REDACTED] 1 returned to a 2020 Silverado registered and with a current title issued to Smith Paint & Body Shop. Both businesses returned to 4264 Meeting Street Rd but were separate entities. The VIN returned with no tag on file for the registration and had unconfirmed insurance status according to SCDMV. The vehicle has an active title issued to it for Smith Paint & Body Shop and not S & F Top Quality Auto Sales LLC.

The Suspect explained he has a dealership and buys vehicles at auctions and that he registered the vehicle to his paint shop but then sold the vehicle to his dealership. I observed how the vehicle was titled only 2 months prior for a sale price of \$1.00 according to SCDMV, and the Suspect would not provide a date or approximate time that the sale took place to try and prove the legitimacy of his use of the Dealer tag on a vehicle titled to a different entity. I explained how the tag would be removed, and the Suspect began talking loudly and directly to my body camera in an antagonistic way. I advised the Suspect the tag would be turned in to the SCDMV as required when the tag is seized for being improperly used.

I removed the tag from the vehicle. I issued a UTT #20241841058322 for the unlawful window tint on the entire windshield as well as the front side windows where no compliance decal was observed. The Suspect was permitted to depart the scene and park in the parking lot at 8096 Rivers Ave while awaiting a ride for the truck and himself.

I then departed the scene with the seized license plate. A short time later at approximately 1624 hours, I was contacted via phone by Lt. King who advised not to turn the license plate into the SCDMV as required to do so when a tag is seized and to await another call with further instructions. Then at 1629 hours, I was contacted by Cpl. Reid who I provided a summary of the incident to. During the conversation I was advised that although required to return the dealer tag to the SCDMV I needed to standby with it at the South Bureau, where I was located at the time, and that Cpl. Bennett would come to retrieve the license plate from me to return it to the Suspect. I inquired why and was informed, "because he's connected apparently." (referring to the Suspect). I then advised Cpl. Reid I would complete an incident report regarding the traffic stop and the events afterwards, we then disconnected. Cpl. Bennett arrived and took the license plate to be returned a short while later.

BWC and ICC active during traffic stop and for interactions with the Suspect. Nothing Further.

## ADDITIONAL NARRATIVE

|  |                     |                                       |                      |
|--|---------------------|---------------------------------------|----------------------|
| Agency Name:<br>NORTH CHARLESTON POLICE DEPARTMENT | ORI #:<br>SC0100800 | Report Date/Time:<br>12/06/2024 15:43 | OCA #:<br>2024031155 |
|--|---------------------|---------------------------------------|----------------------|

Supplement 12/10/24

On 12/10/2024, I Ptl. Bloomer conducted a followup with the Charleston SCDMV Dealer Agent. I explained the circumstances around the traffic stop and the interaction/explanations provided by the Suspect and how the Suspect claimed to be an owner of the dealership and what he did there as far as buying/selling vehicles and the circumstances around the vehicle he was driving when he was stopped.

The Dealer Agent stated the situation sounded strange and she believed it warranted a SCDMV follow up and Audit of the dealer. She further advised she did not believe the Suspect to be listed on the Dealer License and that his wife is the actual licensee and unless he is on payroll and listed as an employee then he would not have a right to drive a vehicle if owned by the dealership unless he was a prospective customer and furnished a Demo form that is issued to customers when test driving vehicles.

The Dealer Agent advised me to file and email a Dealer Complaint form with the SCDMV and if warranted, an audit would be performed on the dealership and all ownership paperwork would be verified for not only the vehicle I performed a traffic stop on, but of all vehicles the dealer claims to have ownership of on their lot. The agent will notify my of changes to the investigation/audit and provide the outcome.

Nothing Further at this time.