



New York City Police Department

OmniForm System - Complaints

Report Cmd: 006	Jurisdiction: N.Y. POLICE DEPT	Record Status: No Status	Complaint #: 1996-006-007241	No Other Legacy Blue Versions	No Other Complaint Revisions
Occurrence Location: [REDACTED] Name Of Premise: Premises Type: COMMERCIAL BUILDING Location Within Premise: OFFICE AREA Visible By Patrol?: NO		NYC Parks Dept. Property Did this offense occur on NYC Parks Dept. Property? Command: NYC Parks Dept. Property Name:		Precinct: 006 Sector: H Beat: 11 Post: 32	

Occurrence From: 1996-07-11 12:00:00 THURSDAY Occurrence thru: 1996-07-17 00:00:00 Reported: 1996-08-29 18:20:09 Complaint Received: WALK-IN	Aided # Accident # O.C.C.B. #
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Classification: AGG HARRASSMENT 2M Attempted/Completed: COMPLETED Most Serious Offense Is: N/A PD Code: 639 AGGRAVATED HARASSMENT 2 PL Section: 24030 Keycode: 361 OFF. AGNST PUB ORD SENSBLTY &	Case Status: CLOSED Unit Referred To: PATROL Clearance Code: Log/Case #: 0 Clearance Arrest Id: Clearance AO Cmd: File #: Prints Requested? NO
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Is This Related To Stop And Frisk Report NO	SQF Number: 0000-000-00000	Was The Victim's Personal Information Taken Or Possessed?	Was The Victim's Personal Information Used To Commit A Crime?
Gang Related?	OCCB FOD Log #:	Name Of Gang:	Child Abuse Suspected?
DIR Required?	Child in Common?	Intimate Relationship?	Officer Body Worn Camera:

If Burglary: Forced Entry? Structure: Entry Method: Entry Location:	Alarm: Bypassed? Comp Responded?: Company Name/Phone: Crime Prevention Survey NO Requested?: Complaint/Reporter Present?:	If Arson: Structure: Occupied?: Damage by:	Taxi Robbery: Partition Present: Amber Stress Light Activated: Method of Conveyance: Location of Pickup:
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Supervisor On Scene - Rank / Name / Command :	Canvas Conducted:	Translator(if used):
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NARRATIVE:
 WITNESS STATES @ T/P/O THE ABOVE MENTIONED PERSON DID CALL HER AND STATED HE WAS GOING TO BURN VICTIM'S PAINTING AND SEND HER POLOROIDS OF THE BURNT PAINTINGS. THE ABOVE MENTIONED PERSON HAS KEYS TO VICTIM'S APARTMENT.

No NYC TRANSIT Data for Complaint # 1996-006-007241

Total Victims: 1	Total Witnesses: 1	Total Reporters: 0	Total Wanted: 1
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VICTIM: # 1 of 1	Name: [REDACTED]	Complaint#: 1996-006-007241
Nick/AKA/Maiden: UMOS: Sex/Type: FEMALE Race: WHITE Age: 26 Date Of Birth: [REDACTED] Disabled? NO		Gang/Crew Affiliation: Name: Identifiers: Will View Photo: NO Will Prosecute: NO Notified Of Crime Victim Comp. Law: NO
Is this person not Proficient in English?: If Yes, Indicate Language: N.Y.C.H.A Resident? Is Victim fearful for their safety / life? Escalating violence / abuse by suspect? Were prior DIR's prepared for C/V?		

LOCATION	ADDRESS	CITY STATE/COUNTRY ZIP	APT/ROOM
HOME-PERMANENT	[REDACTED]	[REDACTED]	[REDACTED]
Phone #: HOME: [REDACTED]			
Action against Victim:		Actions Of Victim Prior To Incident:	
Victim Of Similar Incident:		If Yes, When And Where	

WITNESS : # 1 of 1	Name: [REDACTED]	Complaint #: 1996-006-007241	
Nick/AKA/Maiden: Sex/Type: FEMALE Race: WHITE Age: 025 Date Of Birth: [REDACTED]		Gang/Crew Affiliation: NO Name: Identifiers: Relationship To Victim:	
Is this person not Proficient in English?: NO If Yes, Indicate Language:			
Location	Address	City State/Country Zip	Apt/Room
HOME-PERMANENT	[REDACTED]	[REDACTED]	[REDACTED]

WANTED: # 1 of 1Name:
EPSTEIN, JEFFERYComplaint#:
1996-006-007241

Arrested:

Nick/AKA/Maiden: Height: **6FT 0IN**
 Sex: **MALE** Weight: **200**
 Race: **WHITE** Eye Color: **BLUE**
 Age: **45** Hair Color: **GRAY**
 Date Of Birth: **--** Hair Length: **SHORT**
 U.S. Citizen: Hair Style:
 Place Of Birth: Skin Tone:
 Is this person not Proficient in English?:
 If Yes, Indicate Language:
 Accent: S.S. #: .

Order Of Protection:
 Issuing Court:
 Docket #:
 Expiration Date:
 Order of Protection Violated?
 Does Suspect abuse Drugs / Alcohol?
 Suspect threatened /attempted suicide?
 Is the suspect Parole / Probation?
 Relation to Victim:
 Living together:
 Can be Identified:

Gang/Crew Affiliation:
 Name:
 Identifiers:

LOCATION	ADDRESS	CITY	STATE/COUNTRY	ZIP	APT/ROOM	HOW LONG?	RES. PCT
HOME-PERMANENT					0		0

Phone #:

N.Y.C.H.A. Resident: N.Y.C. Housing Employee: On Duty:
 Development: N.Y.C. Transit Employee:

Physical Force:

Used Transit System:
 Station Entered:
 Time Entered:
 Metro Card Type:
 Metro Card Used/Poses:
 Card #:

CRIME DATA DETAILS

CLOTHING ACCESSORIES - -UNKNOWN COLOR
 CLOTHING FOOTWEAR - -UNKNOWN COLOR
 CLOTHING HEADGEAR - -UNKNOWN COLOR
 CLOTHING OUTERWEAR - -UNKNOWN COLOR

EVIDENCE:Complaint # **1996-006-007241**

Evidence Collected?:	Evidence Collection Team/Crime Scene Requested?:	ECT Responded?:	ECT Run#:	Crime Scene Responded?:	Crime Scene Number:
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Evidence Invoice #**No IMEI Data for Complaint # 1996-006-007241**

Reporting/Investigating M.O.S. Name: PO [REDACTED]	Tax #: [REDACTED]	Command: 006 PCT	Rep.Agency: NYPD
Supervisor Approving Name: SGT [REDACTED]	Tax #: [REDACTED]	Command: 006 PCT	Rep.Agency: NYPD
Complaint Report Entered By: PAA [REDACTED]	Tax #: [REDACTED]	Command: 006 PCT	Rep.Agency: NYPD
Signoff Supervisor Name:	Tax #: 000000	Command:	Rep.Agency:

END OF COMPLAINT REPORT
 # 1996-006-007241

Print this Report