

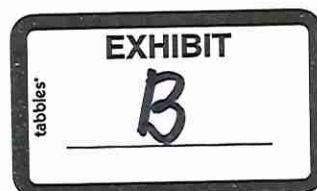


NFIRS-1 Basic

A							
30015	MS	04	15	2023	Central Fire / EOC (1)	2304536	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B Location Type																						
							Census tract:															
<div style="display: flex; justify-content: space-between;"><div style="width: 30%;"><input checked="" type="checkbox"/> Street Address <input type="checkbox"/> Intersection <input type="checkbox"/> In Front Of <input type="checkbox"/> Rear Of <input type="checkbox"/> Adjacent To <input type="checkbox"/> Directions <input type="checkbox"/> US National Grid</div><div style="width: 65%;"><table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%; text-align: center;">1013</td><td style="width: 15%; text-align: center;">Government</td><td style="width: 15%; text-align: center;">ST-Street</td><td style="width: 15%; text-align: center;">Suffix</td></tr><tr><td style="text-align: center;">Number</td><td style="text-align: center;">Prefix</td><td style="text-align: center;">Street or Highway</td><td style="text-align: center;">Suffix</td></tr></table> <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 30%; text-align: center;">City of Ocean Springs</td><td style="width: 10%; text-align: center;">MS</td><td style="width: 10%; text-align: center;">39564</td></tr><tr><td style="text-align: center;">Apt./Suite/Room</td><td style="text-align: center;">City</td><td style="text-align: center;">State</td><td style="text-align: center;">Zip Code</td></tr></table> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div><div style="text-align: center;">Cross Street</div></div></div>								1013	Government	ST-Street	Suffix	Number	Prefix	Street or Highway	Suffix	City of Ocean Springs	MS	39564	Apt./Suite/Room	City	State	Zip Code
1013	Government	ST-Street	Suffix																			
Number	Prefix	Street or Highway	Suffix																			
City of Ocean Springs	MS	39564																				
Apt./Suite/Room	City	State	Zip Code																			

C Incident Type <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">551-Assist police or other governmental agency</div>	E1 Dates and Times <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%;">Alarm</td><td style="width: 10%; text-align: center;">04</td><td style="width: 10%; text-align: center;">15</td><td style="width: 10%; text-align: center;">2023</td><td style="width: 10%; text-align: center;">23:29</td></tr><tr><td>Arrival</td><td style="text-align: center;">04</td><td style="text-align: center;">15</td><td style="text-align: center;">2023</td><td style="text-align: center;">23:34</td></tr><tr><td>Controlled</td><td style="text-align: center;">[]</td><td style="text-align: center;">[]</td><td style="text-align: center;">[]</td><td style="text-align: center;">[]</td></tr><tr><td>Last Unit Cleared</td><td style="text-align: center;">04</td><td style="text-align: center;">15</td><td style="text-align: center;">2023</td><td style="text-align: center;">23:45</td></tr></table>	Alarm	04	15	2023	23:29	Arrival	04	15	2023	23:34	Controlled	[]	[]	[]	[]	Last Unit Cleared	04	15	2023	23:45	E2 Shifts and Alarms <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 15%; text-align: center;">B</td><td style="width: 15%; text-align: center;">[]</td><td style="width: 15%; text-align: center;">[]</td></tr><tr><td style="text-align: center;">Shift or Platoon</td><td style="text-align: center;">Alarms</td><td style="text-align: center;">District</td></tr></table>	B	[]	[]	Shift or Platoon	Alarms	District
Alarm	04	15	2023	23:29																								
Arrival	04	15	2023	23:34																								
Controlled	[]	[]	[]	[]																								
Last Unit Cleared	04	15	2023	23:45																								
B	[]	[]																										
Shift or Platoon	Alarms	District																										
D Aid Given Or Received <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"><table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center;">Their FDID</td><td style="width: 50%; text-align: center;">Their State</td></tr><tr><td colspan="2" style="text-align: center; height: 20px;"></td></tr><tr><td colspan="2" style="text-align: center;">Their Incident Number</td></tr></table></div> <div style="margin-top: 10px;"><input type="checkbox"/> 1 Mutual Aid Received <input type="checkbox"/> 2 Auto. Aid Received <input type="checkbox"/> 3 Mutual Aid Given <input type="checkbox"/> 4 Auto. Aid Given <input type="checkbox"/> 5 Other Aid Given <input checked="" type="checkbox"/> None</div>	Their FDID	Their State			Their Incident Number		E3 Special Studies <table style="width: 100%; border-collapse: collapse;"><tr><td style="width: 50%; text-align: center;">9244</td><td style="width: 50%; text-align: center;">4 - Unknown</td></tr><tr><td style="text-align: center;">ID#</td><td style="text-align: center;">Value</td></tr></table>			9244	4 - Unknown	ID#	Value															
Their FDID	Their State																											
Their Incident Number																												
9244	4 - Unknown																											
ID#	Value																											



F Actions Taken <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">86-Investigate</div> Primary Action Taken	G1 Resources <input checked="" type="checkbox"/> Apparatus or Personnel Module is used. <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">Apparatus</td> <td style="text-align: center;">Personnel</td> </tr> <tr> <td>Suppression <div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> <td><div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> </tr> <tr> <td>EMS <div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> <td><div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> </tr> <tr> <td>Other <div style="border: 1px solid black; width: 40px; text-align: center;">1</div></td> <td><div style="border: 1px solid black; width: 40px; text-align: center;">1</div></td> </tr> </table> <input type="checkbox"/> Resource counts include aid received resources.	Apparatus	Personnel	Suppression <div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	EMS <div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	Other <div style="border: 1px solid black; width: 40px; text-align: center;">1</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">1</div>	G2 Estimated Dollar Losses and Values Losses: Required for all fires if known. Optional for all non-fires. None Property: \$ <div style="border: 1px solid black; width: 100px;"></div> <input checked="" type="checkbox"/> Contents: \$ <div style="border: 1px solid black; width: 100px;"></div> <input checked="" type="checkbox"/> Pre-Incident Values: Optional None Property: \$ <div style="border: 1px solid black; width: 100px;"></div> <input checked="" type="checkbox"/> Contents: \$ <div style="border: 1px solid black; width: 100px;"></div> <input checked="" type="checkbox"/>
Apparatus	Personnel									
Suppression <div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>									
EMS <div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>									
Other <div style="border: 1px solid black; width: 40px; text-align: center;">1</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">1</div>									

Completed Modules <input type="checkbox"/> 2 - Fire <input type="checkbox"/> 3 - Structure Fire <input type="checkbox"/> 4 - Civilian Fire Cas. <input type="checkbox"/> 5 - Fire Service Cas. <input type="checkbox"/> 6 - EMS <input type="checkbox"/> 7 - HazMat <input type="checkbox"/> 8 - Wildland Fire <input type="checkbox"/> 9 - Apparatus <input type="checkbox"/> 10 - Personnel <input type="checkbox"/> 11 - Arson	H1 Casualties <input checked="" type="checkbox"/> None <table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: center;">Deaths</td> <td style="text-align: center;">Injuries</td> </tr> <tr> <td>Fire Service</td> <td style="text-align: center;"><div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> <td style="text-align: center;"><div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> </tr> <tr> <td>Civilian</td> <td style="text-align: center;"><div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> <td style="text-align: center;"><div style="border: 1px solid black; width: 40px; text-align: center;">0</div></td> </tr> </table> H2 Detector Required for Confined Fires <input type="checkbox"/> 1 - Detector Alerted Occupants <input type="checkbox"/> 2 - Detector Did Not Alert Them <input type="checkbox"/> 3 - Unknown		Deaths	Injuries	Fire Service	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	Civilian	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	H3 Hazardous Materials Release <input type="checkbox"/> 1 - Natural Gas <input type="checkbox"/> 2 - Propane Gas <input type="checkbox"/> 3 - Gasoline <input type="checkbox"/> 4 - Kerosene <input type="checkbox"/> 5 - Diesel Fuel / Fuel Oil <input type="checkbox"/> 6 - Household Solvents <input type="checkbox"/> 7 - Motor Oil <input type="checkbox"/> 8 - Paint <input type="checkbox"/> 0 - Other <input checked="" type="checkbox"/> None	I Mixed Use Property <input type="checkbox"/> Not Mixed <input type="checkbox"/> 10 - Assembly Use <input type="checkbox"/> 20 - Education Use <input type="checkbox"/> 33 - Medical Use <input type="checkbox"/> 40 - Residential Use <input type="checkbox"/> 51 - Row Of Stores <input type="checkbox"/> 53 - Enclosed Mall <input type="checkbox"/> 58 - Business and Residential <input type="checkbox"/> 59 - Office Use <input type="checkbox"/> 60 - Industrial Use <input type="checkbox"/> 63 - Military Use <input type="checkbox"/> 65 - Farm Use <input type="checkbox"/> 00 - Other Mixed Use
	Deaths	Injuries										
Fire Service	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>										
Civilian	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>	<div style="border: 1px solid black; width: 40px; text-align: center;">0</div>										

J Property Use <input type="checkbox"/> None Structures 131 <input type="checkbox"/> Church, Place of Worship 161 <input type="checkbox"/> Restaurant or Cafeteria 162 <input checked="" type="checkbox"/> Bar/Tavern or Nightclub 213 <input type="checkbox"/> Elementary School, Kindergarten 215 <input type="checkbox"/> High School, Junior High 241 <input type="checkbox"/> College, Adult Education 311 <input type="checkbox"/> Nursing Home 331 <input type="checkbox"/> Hospital	341 <input type="checkbox"/> Clinic, Clinic-Type Infirmary 342 <input type="checkbox"/> Doctor/Dentist Office 361 <input type="checkbox"/> Prison or Jail, Not Juvenile 419 <input type="checkbox"/> 1- or 2-Family Dwelling 429 <input type="checkbox"/> MultiFamily Dwelling 439 <input type="checkbox"/> Rooming/Boarding House 449 <input type="checkbox"/> Commerical Hotel or Motel 459 <input type="checkbox"/> Residential, Board and Care 464 <input type="checkbox"/> Dormitory/Barracks 519 <input type="checkbox"/> Food and Beverage Sales	539 <input type="checkbox"/> Household Goods, Sales, Repairs 571 <input type="checkbox"/> Gas or Service Station 579 <input type="checkbox"/> Motor Vehicle/Boat Sales/Repairs 599 <input type="checkbox"/> Business Office 615 <input type="checkbox"/> Electric-Generating Plant 629 <input type="checkbox"/> Laboratory/Science Laboratory 700 <input type="checkbox"/> Manufacturing Plant 819 <input type="checkbox"/> Livestock/Poultry Storage (Barn) 882 <input type="checkbox"/> Non-Residential Parking Garage 891 <input type="checkbox"/> Warehouse
--	--	--

Outside 124 <input type="checkbox"/> Playground or Park 655 <input type="checkbox"/> Crops or Orchard 669 <input type="checkbox"/> Forest (Timberland) 807 <input type="checkbox"/> Outdoor Storage Area 919 <input type="checkbox"/> Dump or Sanitary Landfill 931 <input type="checkbox"/> Open Land or Field 936 <input type="checkbox"/> Vacant Lot	938 <input type="checkbox"/> Graded/Cared for Plot of Land 946 <input type="checkbox"/> Lake, River, Stream 951 <input type="checkbox"/> Railroad Right-of-Way 960 <input type="checkbox"/> Other Street 961 <input type="checkbox"/> Highway/Divided Highway 962 <input type="checkbox"/> Residential Street/Driveway 981 <input type="checkbox"/> Construction Site 984 <input type="checkbox"/> Industrial Plant Yard	Property Use: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Description Look up and enter a Property Use code and description only if you have NOT checked a Property Use box.
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K2				
Owner				
Local Option	Person/Entity Type	Business Name (if applicable)	Phone Number	
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Mr., Ms., Mrs.	First Name	MI	Last Name	Suffix
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
Number	Prefix	Street or Highway	Street Type	Suffix
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>	<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
Post Office Box		Apt./Suite/Room		City
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>		<div style="border: 1px solid black; width: 100%; height: 20px;"></div>		<div style="border: 1px solid black; width: 100%; height: 20px;"></div>
State		Zip Code		
<div style="border: 1px solid black; width: 100%; height: 20px;"></div>		<div style="border: 1px solid black; width: 100%; height: 20px;"></div>		

L Remarks:

Dispatch called Central and asked if we could assist police with an occupancy capacity at the Scratch Kitchen. B.C Fisher went and talked to the manager and told her no one else could go in just come out. She stated that they were going to start clearing out around 12:00 for a (VIP) party with around 75 people. The officer was told to call if he needed us down there again.

M Authorization

FISDA5559	FISHER, DAVID	BATTALION CHIEF	Central Fire / EOC	04/16/2023
Officer In Charge ID	Signature	Position or Rank	Assignment	Date
FISDA5559	FISHER, DAVID	BATTALION CHIEF	Central Fire / EOC	04/16/2023
Member Making Report ID	Signature	Position or Rank	Assignment	Date

NFIRS-9 Apparatus or Resources

A

30015	MS	04	15	2023	Central Fire / EOC (1)	2304536	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B

Apparatus/Resource	Dates/Times	Sent	Number of People	Apparatus Use	Actions Taken
ID: F-3	Dispatch: 04/15/2023 23:29	<input checked="" type="checkbox"/> Sent	1	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input checked="" type="checkbox"/> Other	<input type="checkbox"/>
Type: 91-Mobile command post	Arrival: 04/15/2023 23:34				
	Clear: 04/15/2023 23:45				

NFIRS-10 Personnel

A							
30015	MS	04	15	2023	Central Fire / EOC (1)	2304536	0
FDID	State	Month	Day	Year	Station	Number	Exposure

B											
Apparatus/Resource	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Dates/Times</td> <td style="width: 10%;">Sent</td> <td style="width: 10%;">Number of People</td> <td style="width: 25%;">Apparatus Use</td> <td style="width: 30%;">Actions Taken</td> </tr> <tr> <td> ID: F-3 Type: 91-Mobile command post </td> <td> Dispatch: 04/15/2023 23:29 Arrival: 04/15/2023 23:34 Clear: 04/15/2023 23:45 </td> <td> <input checked="" type="checkbox"/> Sent 1 </td> <td> <input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input checked="" type="checkbox"/> Other </td> <td> <input type="checkbox"/> </td> </tr> </table>	Dates/Times	Sent	Number of People	Apparatus Use	Actions Taken	ID: F-3 Type: 91-Mobile command post	Dispatch: 04/15/2023 23:29 Arrival: 04/15/2023 23:34 Clear: 04/15/2023 23:45	<input checked="" type="checkbox"/> Sent 1	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input checked="" type="checkbox"/> Other	<input type="checkbox"/>
Dates/Times	Sent	Number of People	Apparatus Use	Actions Taken							
ID: F-3 Type: 91-Mobile command post	Dispatch: 04/15/2023 23:29 Arrival: 04/15/2023 23:34 Clear: 04/15/2023 23:45	<input checked="" type="checkbox"/> Sent 1	<input type="checkbox"/> Suppression <input type="checkbox"/> EMS <input checked="" type="checkbox"/> Other	<input type="checkbox"/>							
Personnel ID	Name Rank Role Attend Actions Taken										
FISDA5559	FISHER, DAVID BATTALION 5588002-Officer CHIEF										

NFIRS-1S Supplemental

A

30015	MS	04	15	2023	Central Fire / EOC (1)	2304536	0
FDID	State	Month	Day	Year	Station	Number	Exposure

Primary Narrative:

Dispatch called Central and asked if we could assist police with an occupancy capacity at the Scratch Kitchen. B.C Fisher went and talked to the manager and told her no one else could go in just come out. She stated that they were going to start clearing out around 12:00 for a (VIP) party with around 75 people. The officer was told to call if he needed us down there again.

E3 Supplemental Special Studies

Local Option

1	9244	4 - Unknown	2			3			4		
	Special Study ID#	Special Study Value		Special Study ID#	Special Study Value		Special Study ID#	Special Study Value		Special Study ID#	Special Study Value
5			6			7			8		
	Special Study ID#	Special Study Value		Special Study ID#	Special Study Value		Special Study ID#	Special Study Value		Special Study ID#	Special Study Value

OCEAN SPRINGS POLICE DEPT

Page: 1

ORI #: MS0300200			
INCIDENT #:	2023007317	DATE OF INCIDENT:	5/05/23
		TIME OF INCIDENT:	15:06
INCIDENT TYPE (SIGNAL): 115 VIOLATE CITY ORDINAN			
REPORT TYPE: Initial	OFFICER: COTHERN, L	BADGE #: F5	
COMPLAINANT:(Last, First, Middle) CITY OF OCEAN SPRINGS,			HOME PHONE: (228)875-2211
ADDRESS: 3810 BIENVILLE BLVD OCEAN SPRINGS MS 00000000			BUSINESS PHONE: (228)
LOCATION OF INCIDENT: 1013 GOVERNMENT OCEAN SPRINGS			
X Coordinate: Y Coordinate:			
RECEIVED: 05/05/2023 15:06	DISPATCHED: 05/05/2023 15:07	ENROUTE:	
ARRIVED: 05/05/2023 15:07	UNDER CONTROL:	COMPLETED: 05/05/2023 15:08	
STATUS DATE/TIME:	STATUS:	CLEARED EXCEPTIONAL REASON/DATE (if applicable)	
05/05/2023 15:07	PENDING		
OFFENSE ATTEMPTED:NO			
SEQ. NUM 1	OFFENSEVCO - FIRE CODE VIOLATION 300007		RSA# CHAPTER 9
OFFENSE LOCATION TYPE		(FOR BURGLARY ONLY)	METHOD OF ENTRY
03 BAR / NIGHTCLUB		NBR OF PREMISES ENTERED:	
CRIMINAL ACTIVITY TYPE		TYPE WEAPON/FORCE INVOLVED	
UCR Code:			
Offense Connected to Offender Sequence Number:		1	ALEXANDER, BRITTANY CRUSO
Offense Connected to Victim Sequence Number:		1	CITY OF OCEAN SPRINGS,
ASSIGNED OFFICER			
NAME:COTHERN, LIONEL JR			
ADDRESS: 3810 BIENVILLE OCEAN SPRINGS MS 00000000			
PHONE: (HOME) (228)		(BUSINESS) (228)	(OTHER) (228)
SEX: U	RACE: U	ETHNICITY:U	DOB:
AGE: 222 +/- 00	SSN:		
HEIGHT: 0- 0	WEIGHT: 0	EYES:	HAIR:UNKN
RESIDENT STATUS: U			
DISPATCHER			
NAME:STASZKO, DONNA			
OFFENDER			
OFFENDER #: 1	NAME: ALEXANDER, BRITTANY CRUSO		
HATE/BIAS MOTIVATED:		CLOTHING:	
ADDRESS: OCEAN SPRINGS MS 395640000			
PHONE: (BUSINESS)		(OTHER)	
SEX: F	RACE: B	ETHNICITY:N	DOB:
AGE: 37 +/- 00	SSN:		
HEIGHT: 5- 1	WEIGHT: 150	EYES: BROWN	HAIR:BLACK
RESIDENT STATUS: R			
OFFENDER USED: NOT APPLICABLE			
RECEIVED BY			
NAME:STASZKO, DONNA			

OCEAN SPRINGS POLICE DEPT

Page: 2

ORI #: MS0300200			
INCIDENT #:	2023007317	DATE OF INCIDENT: 5/05/23	TIME OF INCIDENT: 15:06
INCIDENT TYPE (SIGNAL): 115 VIOLATE CITY ORDINAN			
RECEIVED BY			
NAME: STASZKO, DONNA			
VICTIM		TYPE OF COMPLAINANT: G	Victim Also Complainant: Y
VIC #:	NAME: CITY OF OCEAN SPRINGS,		
ADDRESS: 3810 BIENVILLE BLVD OCEAN SPRINGS MS 00000000			
PHONE: (HOME) (228) 875-2211		(BUSINESS) (228)	(OTHER) (228)
SEX: U	RACE: U	ETHNICITY: U	DOB: AGE: 0 +/- 00 SSN:
HEIGHT: 0- 0	WEIGHT: 0	EYES:	HAIR: RESIDENT STATUS: R
AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCES: N/A			
NEGLIGENT MANSLAUGHTER: N/A			
JUSTIFIABLE HOMICIDE: N/A			
ADDITIONAL JUSTIFIABLE HOMICIDE CIRCUMSTANCES: N/A			
INJURY TYPE(S): NONE			
Offender #: 1 Relationship: ST VICTIM WAS STRANGER			

OCEAN SPRINGS POLICE DEPT

Page: 1

ORI #: MS0300200			
INCIDENT #: 2023007317		DATE OF INCIDENT: 5/05/23	TIME OF INCIDENT: 15:06
INCIDENT TYPE (SIGNAL): 115 VIOLATE CITY ORDINAN			
Agency: OSPD	Incident No: 2023007317	Date Entered: 5/05/2023	Sequence: 1
Author: COTHERN, LIONEL JR		Title: FIRE CODE VIOLATION OVERCROWDING	

On April 18, 2023, at approximately 0800 hours, I, Fire Marshal Lionel Cothorn, F5, was made aware of an overcrowding issue at a bar located at 1013 Government Street (The Scratch Kitchen) on April 08, 2023. I was able to obtain photographic evidence of the violation via Brittany C. Alexander's Facebook profile page. Brittany is the owner/manager of The Scratch Kitchen. The occupancy limit for the outside enclosed area of The Scratch Kitchen is 80 people. In the photo I counted 80 people in approximately two thirds (2/3) of the picture. Well over 100+ people are visible in the photo. This is a life safety issue and a violation of the City of Ocean Springs Ordinance Sec 9-1. Fire Code adopted. The City of Ocean Springs has adopted The International Fire Code 2018 Edition. (IFC) 2018 Sec. 108.6 Overcrowding. I filed a complaint affidavit against Brittany C. Alexander for a violation of a city ordinance on 05/05/2023.

7 pictures will be added for evidence.

COMPLAINT

State of Mississippi
Jackson County
City of Ocean Springs

Warrant Number: _____
Case Number: 23-007317

Before me, the undersigned, personally appeared this day the undersigned complainant who, upon first being duly sworn, states on oath that he/she has probable cause for believing, and does believe, that the Defendant Brittany C. Alexander (12/24/1985),
DEFENDANT NAME DEFENDANT DATE OF BIRTH
did, prior to the commencement of this action, commit the offense of
108.6 Overcrowding (2018 International Fire Code) within the City of Ocean Springs, Mississippi, or
OFFENSE
in the police jurisdiction thereof, on or about the 8th of April, 2023, in that he/she
DATE MONTH YEAR
knowingly and willingly allowed her business The Scratch Kitchen, located at 1013 Government Street, to be
overcrowded, by exceeding the maximum outside occupancy limit of 80 people, set by the Ocean Springs Fire
Dept. The defendant had over 100 people in the outside enclosed area of her bar.

Copy

against the peace and dignity of the State of Mississippi, City of Ocean Springs, Jackson County,
Mississippi in violation of Section _____ Mississippi Code
1972, or Ordinance Sec 9-1. IFC 2018 Sec 108.6 of the above city.

Fire Marshal F5 Lionel Cothorn
PRINTED NAME OF COMPLAINANT

Lionel Cothorn F5
SIGNATURE OF COMPLAINANT

Sworn to and subscribed to me this

____ day of May, 2023

COURT CLERK/DEPUTY COURT CLERK

CAPACITY

Inside 63

Outside 80

This authorized capacity certificate must be displayed in a conspicuous location by authority of the Ocean Springs Fire Department.

Name of Business: The Scratch Kitchen

Address: 1013 Government St.

Date 09/14/2022

Fire Marshal

THE SCRATCH KITCHEN & BAR
x SKIP THE LINE GANG PRESENTS

1 YEAR

CELEBRATION PARTY

04.08.2023 | 4 PM - 12 AM

DJ DANK | DJ NINO | ALL THE SMOKE HOOKAHS
FREE ENTRY • 21+ ONLY ON THE PATIO 4 PM UNTIL

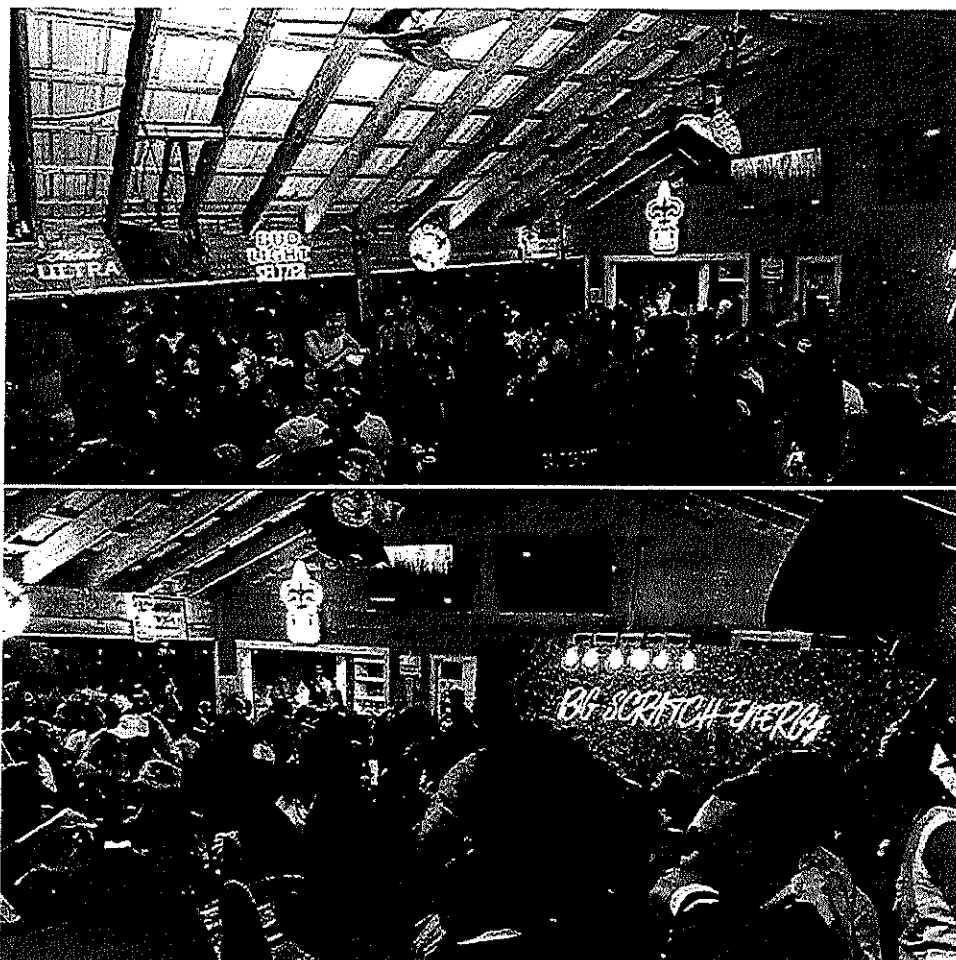


Brittany Cruso is feeling thankful.

April 8 at 11:49 PM ·



... nothing but love and a really big vibe ♡ 🎵



153

1 comment 18 shares



Like



Share



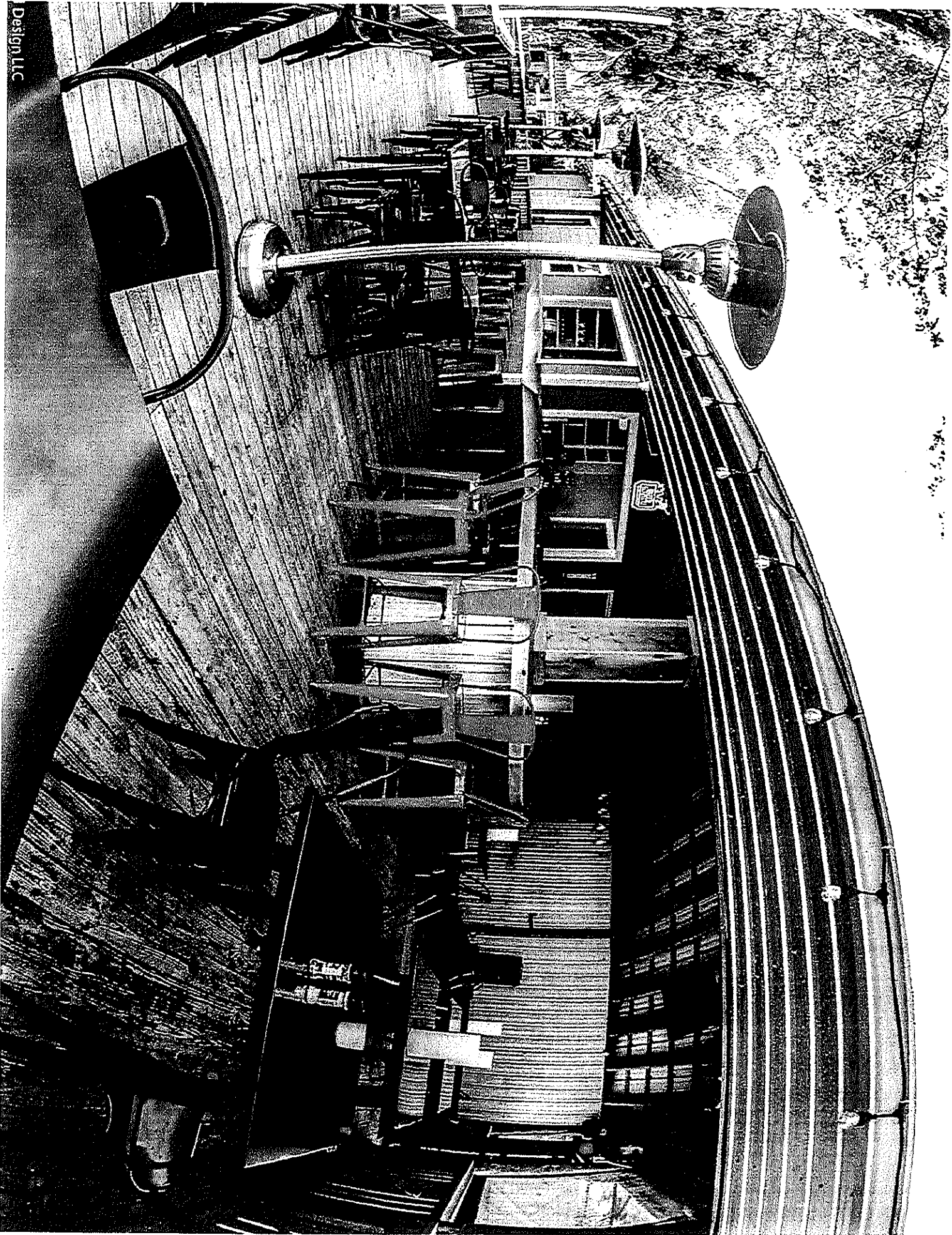
Katilya Anderson · Follow

Natasha Magee told u Scratch Kitchen

Like 1w

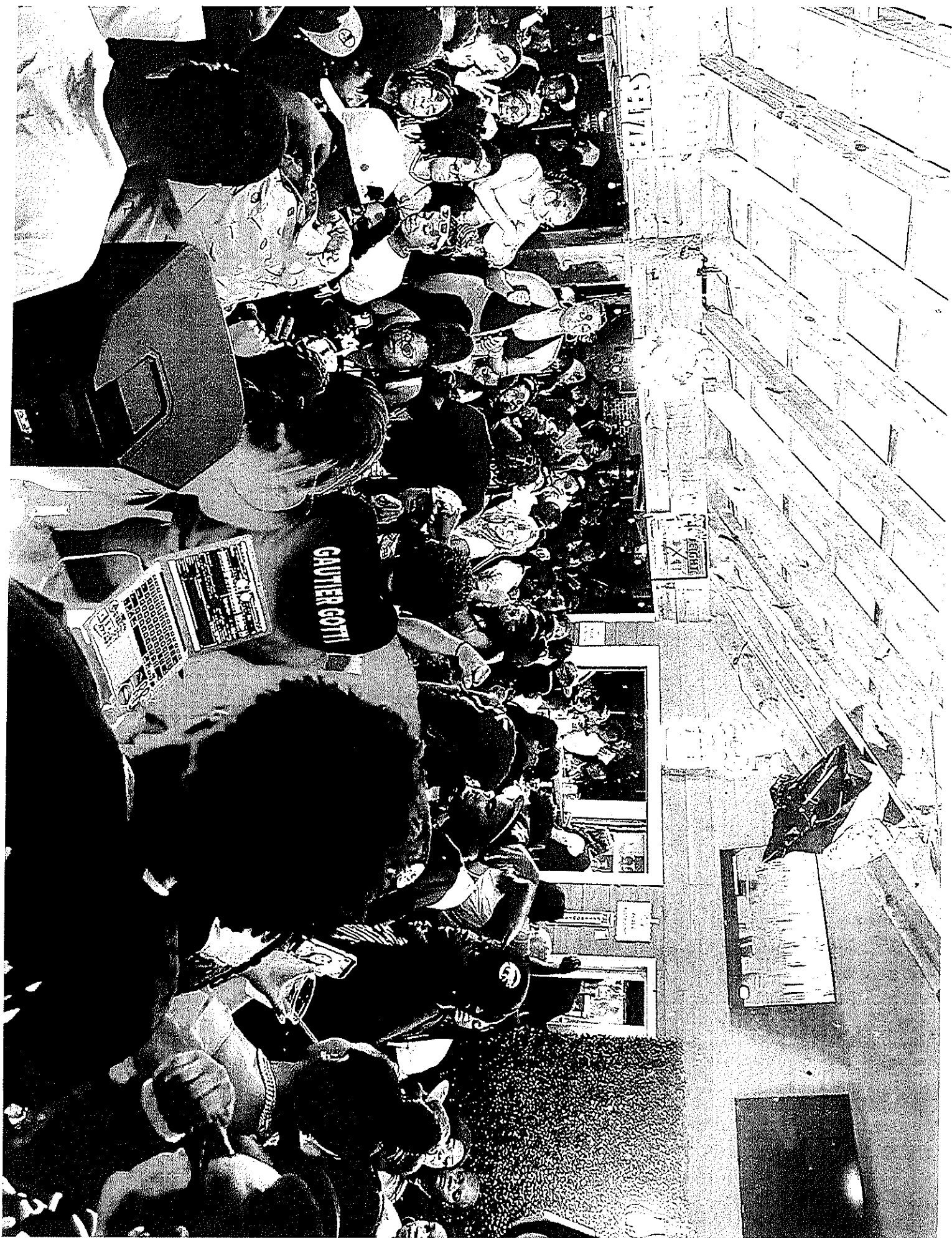


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OCEAN SPRINGS POLICE DEPT

Page: 1

ORI #: MS0300200			
INCIDENT #:	2023007470	DATE OF INCIDENT:	5/08/23
		TIME OF INCIDENT:	14:23
INCIDENT TYPE (SIGNAL): 115 VIOLATE CITY ORDINAN			
REPORT TYPE: Initial	OFFICER: COTHERN, L	BADGE #: F5	
COMPLAINANT:(Last, First, Middle) CITY OF OCEAN SPRINGS,		HOME PHONE: (228)875-2211	
ADDRESS: 3810 BIENVILLE BLVD OCEAN SPRINGS MS 00000000		BUSINESS PHONE: (228)	
LOCATION OF INCIDENT: 1013 GOVERNMENT OCEAN SPRINGS			
X Coordinate: Y Coordinate:			
RECEIVED: 05/08/2023 14:23	DISPATCHED: 05/08/2023 14:24	ENROUTE:	
ARRIVED: 05/08/2023 14:24	UNDER CONTROL:	COMPLETED: 05/08/2023 14:53	
STATUS DATE/TIME:	STATUS:	CLEARED EXCEPTIONAL REASON/DATE (if applicable)	
05/08/2023 15:01	PENDING		
OFFENSE ATTEMPTED:NO			
SEQ. NUM 1	OFFENSEVCO - FIRE CODE VIOLATION 300007		RSA# CHAPTER 9
OFFENSE LOCATION TYPE		(FOR BURGLARY ONLY)	METHOD OF ENTRY
03 BAR / NIGHTCLUB		NBR OF PREMISES ENTERED:	
CRIMINAL ACTIVITY TYPE		TYPE WEAPON/FORCE INVOLVED	
UCR Code:			
Offense Connected to Offender Sequence Number:		1 ALEXANDER, BRITTANY CRUSO	
Offense Connected to Victim Sequence Number:		1 CITY OF OCEAN SPRINGS,	
ASSIGNED OFFICER			
NAME:COTHERN, LIONEL JR			
ADDRESS: 3810 BIENVILLE OCEAN SPRINGS MS 00000000			
PHONE: (HOME) (228)		(BUSINESS) (228)	(OTHER) (228)
SEX: U	RACE: U	ETHNICITYU	DOB:
AGE: 222 +/- 00	SSN:		
HEIGHT: 0- 0	WEIGHT: 0	EYES:	HAIR: UNKN
RESIDENT STATU: U			
DISPATCHER			
NAME:NICHOLS, WILLIAM			
OFFENDER			
OFFENDER #: 1	NAME: ALEXANDER, BRITTANY CRUSO		
HATE/BIAS MOTIVATED:		CLOTHING:	
ADDRESS: OCEAN SPRINGS MS 395640000			
PHONE: (HOME)		(BUSINESS)	(OTHER)
SEX: F	RACE: B	ETHNICITYN	DOB:
AGE: 37 +/- 00	SSN:		
HEIGHT: 5- 1	WEIGHT: 150	EYES: BROWN	HAIR: BLACK
RESIDENT STATU: R			
OFFENDER USED: NOT APPLICABLE			
RECEIVED BY			
NAME:NICHOLS, WILLIAM			

OCEAN SPRINGS POLICE DEPT

Page: 2

ORI #: MS0300200			
INCIDENT #:	2023007470	DATE OF INCIDENT: 5/08/23	TIME OF INCIDENT: 14:23
INCIDENT TYPE (SIGNAL): 115 VIOLATE CITY ORDINAN			
RECEIVED BY			
NAME:NICHOLS, WILLIAM			
VICTIM		TYPE OF COMPLAINANT: G	Victim Also Complainant: Y
VIC #:	NAME:CITY OF OCEAN SPRINGS,		
ADDRESS: 3810 BIENVILLE BLVD OCEAN SPRINGS MS 00000000			
PHONE: (HOME) (228) 875-2211		(BUSINESS) (228)	(OTHER) (228)
SEX: U	RACE: U	ETHNICITY: U	DOB:
AGE: 0	+/- 00	SSN:	
HEIGHT: 0-0	WEIGHT: 0	EYES:	HAIR:
RESIDENT STATUS: R			
AGGRAVATED ASSAULT/HOMICIDE CIRCUMSTANCES: N/A			
NEGLIGENT MANSLAUGHTER: N/A			
JUSTIFIABLE HOMICIDE: N/A			
ADDITIONAL JUSTIFIABLE HOMICIDE CIRCUMSTANCES: N/A			
INJURY TYPE(S): NONE			

OCEAN SPRINGS POLICE DEPT

Page: 1

ORI #: MS0300200			
INCIDENT #: 2023007470		DATE OF INCIDENT: 5/08/23	TIME OF INCIDENT: 14:23
INCIDENT TYPE (SIGNAL): 115 VIOLATE CITY ORDINAN			
Agency: OSPD	Incident No: 2023007470	Date Entered: 5/08/2023	Sequence: 1
Author: COTHERN, LIONEL JR		Title: FIRE CODE VIOLATION OVERCROWDING	

On May 6, 2023, at approximately 0700 hours, I, Fire Marshal Lionel Cothorn, F5, observed an after the fact video of an overcrowding issue at a bar located at 1013 Government Street (The Scratch Kitchen) at approximately 2240 hours on May 05, 2023. I was able to obtain video evidence of the violation via Facebook. Brittany C. Alexander is the owner/manager of The Scratch Kitchen. The occupancy limit for the outside enclosed area of The Scratch Kitchen is 80 people. I was able to pause the video and take a screen shot with my laptop. I printed the screen shots and counted the people in the photos. I printed 4 sections of the bar and counted a total of 107 people. This is a life safety issue and a violation of the City of Ocean Springs Ordinance Sec 9-1. Fire Code adopted. The City of Ocean Springs has adopted The International Fire Code 2018 Edition. (IFC) 2018 Sec. 108.6 Overcrowding. I filed a complaint affidavit against Brittany C. Alexander for a violation of a city ordinance on 05/08/2023.

5 pictures will be submitted for evidence.

COMPLAINT

State of Mississippi
Jackson County
City of Ocean Springs

Warrant Number: _____
Case Number: 2023-007470

Before me, the undersigned, personally appeared this day the undersigned complainant who, upon first being duly sworn, states on oath that he/she has probable cause for believing, and does believe, that the

Defendant Brittany C. Alexander (12/24/1985),
DEFENDANT NAME DEFENDANT DATE OF BIRTH

did, prior to the commencement of this action, commit the offense of

108.6 Overcrowding (2018 International Fire Code) within the City of Ocean Springs, Mississippi, or
OFFENSE

in the police jurisdiction thereof, on or about the 5th of May, 2023, in that he/she
DATE MONTH YEAR
knowingly and willingly allowed her business the Scratch Kitchen, located at 1013 Government Street, to be
overcrowded, by exceeding the maximum outside occupancy limit of 80 people, set by the Ocean Springs Fire
Department. I counted 107 people in 4 pictures from the night of 05/05/2023.

against the peace and dignity of the State of Mississippi, City of Ocean Springs, Jackson County,
Mississippi in violation of Section _____ Mississippi Code
1972, or Ordinance Sec 9-1. IFC 2018 Sec 108.6 of the above city.

Fire Marshal F5 Lionel Cothorn
PRINTED NAME OF COMPLAINANT

Lionel Cothorn F5
SIGNATURE OF COMPLAINANT

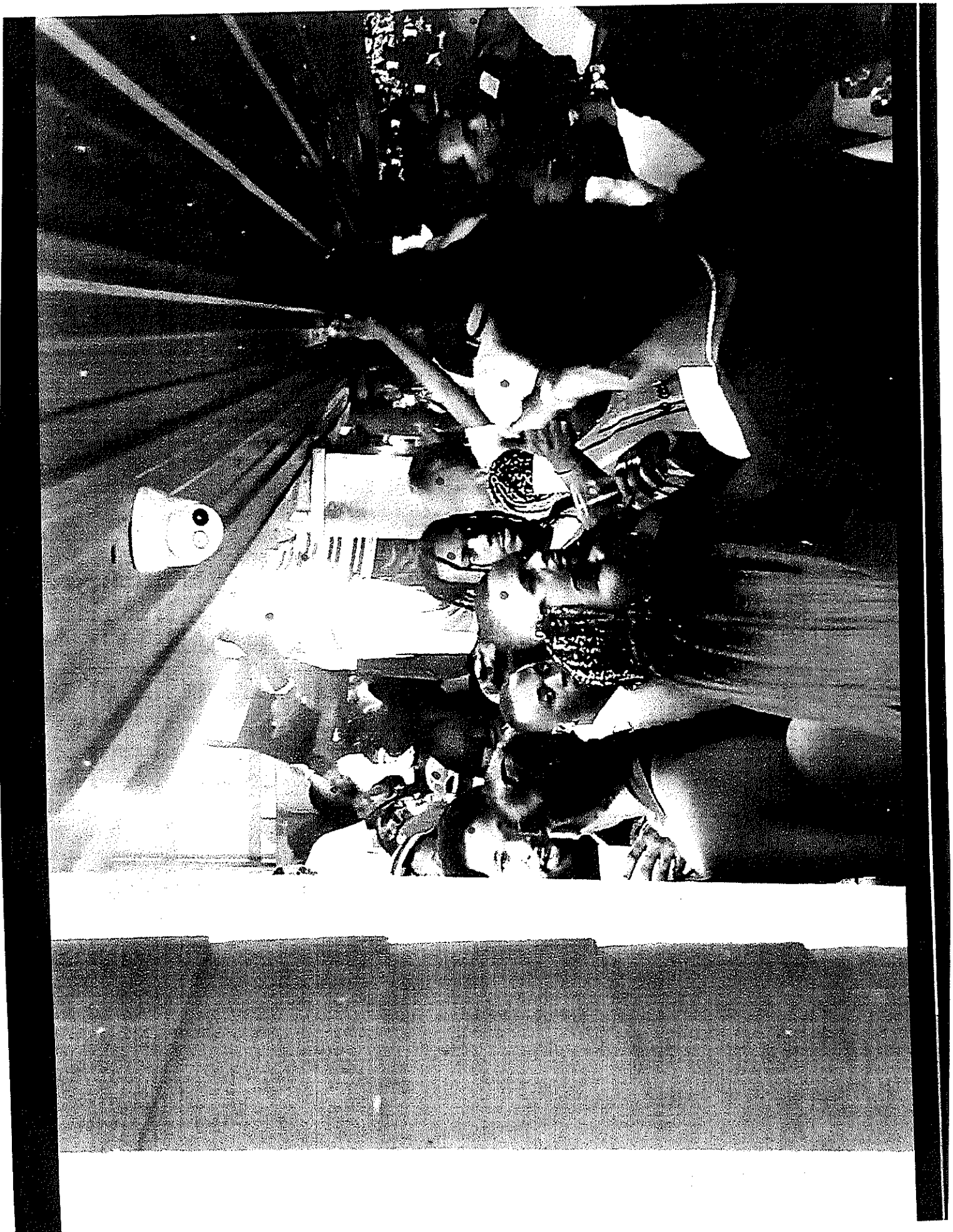
Sworn to and subscribed to me this

____ day of _____, 2023.

COURT CLERK/DEPUTY COURT CLERK







40



CAPACITY

Inside 63

Outside 80

This authorized capacity certificate must be displayed in a conspicuous location by authority of the Ocean Springs Fire Department.

Name of Business: The Scratch Kitchen

Address: 1013 Government St.

Date 09/14/2022

Fire Marshal